
State:	District of Columbia	Filing Company:	Ameritas Life Insurance Corp.
TOI/Sub-TOI:	L07I Individual Life - Whole/L07I.101 Fixed/Indeterminate Premium - Single Life		
Product Name:	L-3017 10-16, etal		
Project Name/Number:	L-3017 10-16, etal/L-3017 10-16, etal		

Filing at a Glance

Company:	Ameritas Life Insurance Corp.
Product Name:	L-3017 10-16, etal
State:	District of Columbia
TOI:	L07I Individual Life - Whole
Sub-TOI:	L07I.101 Fixed/Indeterminate Premium - Single Life
Filing Type:	Form
Date Submitted:	11/08/2016
SERFF Tr Num:	AMFA-130772420
SERFF Status:	Assigned
State Tr Num:	
State Status:	
Co Tr Num:	L-3017 10-16, ETAL
Implementation	On Approval
Date Requested:	
Author(s):	Cindy Meyer, Joanne Friend, Bobbie Cramer
Reviewer(s):	John Rielley (primary)
Disposition Date:	
Disposition Status:	
Implementation Date:	

State: District of Columbia **Filing Company:** Ameritas Life Insurance Corp.
TOI/Sub-TOI: L071 Individual Life - Whole/L071.101 Fixed/Indeterminate Premium - Single Life
Product Name: L-3017 10-16, etal
Project Name/Number: L-3017 10-16, etal/L-3017 10-16, etal

General Information

Project Name: L-3017 10-16, etal Status of Filing in Domicile: Pending
 Project Number: L-3017 10-16, etal Date Approved in Domicile:
 Requested Filing Mode: Review & Approval Domicile Status Comments:
 Explanation for Combination/Other: Market Type: Individual
 Submission Type: New Submission Individual Market Type:
 Overall Rate Impact: Filing Status Changed: 11/10/2016
 State Status Changed:
 Deemer Date: Created By: Bobbie Cramer
 Submitted By: Bobbie Cramer Corresponding Filing Tracking Number:

Filing Description:

RE: Ameritas Life Insurance Corp. / NAIC Number: 0943-6130 / FEIN Number: 47-0098400

Policies/Insert Pages:

3017 10-16 DC – Whole Life Policy
 3017 P121 SCH 10-16 – Whole Life Policy Schedule Page
 3018 10-16 DC – Whole Life Policy
 3018 P100 SCH 10-16 – Whole Life Policy Schedule Page
 3018 P10 SCH 10-16 – Whole Life Policy Schedule Page

Riders:

ADBRWLT 10-16 – Accidental Death Benefit Rider
 CIRWLT 10-16 – Children's Insurance Rider
 FPURWL 10-16 DC – Flexible Paid-Up Rider
 GIRWL 10-16 – Guaranteed Insurability Rider
 LTRWL 10-16 – Level Term Rider
 WPRWL 10-16 – Waiver of Premium Rider

Endorsements:

AEECWL 10-16 – Aviation Exclusion Endorsement – Civil
 AEEMWL 10-16 – Aviation Exclusion Endorsement – Military
 AHEWL 10-16 – Aviation Hazard Endorsement
 CE 10-16 – Conversion Endorsement
 EPEADB 10-16 – Extra Premium Endorsement for Accidental Death Benefit
 EPEWL 10-16 – Extra Premium Endorsement
 EPEWP 10-16 – Extra Premium Endorsement for Waiver of Premium
 HOEWL 10-16 – Hazardous Occupation Endorsement
 REEWL 10-16 – Racing Exclusion Endorsement

Attached for your review and approval are the above referenced whole life policies and associated forms. These forms are new and will not replace any previously approved forms. These policies are sex-distinct. We confirm that the policies will not be issued in any employer-employee plans that are subject to the Norris decision and/or Title VII of the Civil Rights Act of 1964.

3017 10-16 DC – Whole Life Policy – The policy provides benefits payable upon death or cash withdrawal and is designed with

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a low premium base. This form has a variable loan interest rate. The policy will be marketed on an individual basis and will be illustrated. There is an unrestricted market for which this product is intended.

3017 P121 SCH 10-16 – Policy Schedule – This form is an insert page containing premium and cash value information and will be issued with form ICC16 3017 10-16 The issue ages are 0-85.

3018 10-16 DC – Whole Life Policy – This policy provides benefits payable upon death or cash withdrawal and is designed for greater accumulation of value. This form has a fixed loan interest rate. The policy will be marketed on an individual basis and will be illustrated. There is an unrestricted market for which this product is intended.

3018 P100 SCH 10-16 – Policy Schedule – This form is an insert page containing premium and cash value information and will be issued with form ICC16 3018 10-16. This form will be used when the policy owner elects to pay premiums for 100 years. The issue ages are 0-95.

3018 P10 SCH 10-16 – Policy Schedule – This form is an insert page containing premium and cash value information and will be issued with form ICC16 3018 10-16. This form will be used when the policy owner elects to pay premiums for 10 years. The issue ages are 0-90.

ADBRWLT 10-16 DC – Accidental Death Benefit Rider – This rider allows the policy owner to select an amount to be paid (in addition to the base policy amount) upon accidental death as defined in the rider.

CIRWLT 10-16 – Children's Insurance Rider – This rider provides term insurance coverage on the insured's children from 15 days old until their 25th birthday.

FPURWL 10-16 DC – Flexible Paid-Up Rider – This rider allows the base policy owner to purchase additional paid-up life insurance.

GIRWL 10-16 – Guaranteed Insurability Rider – This rider allows the base policy owner to purchase a new policy on the life of the insured without submitting evidence of insurability.

LTRWL 10-16 – Level Term Rider – This is a renewable term rider with indeterminate premium rates. The rider provides the policy owner a choice of level term periods of 10, 15, 20 or 30 years

WPRWL 10-16 – Waiver of Premium Rider – This rider provides for the premium to be waived on the base policy and all riders except for any paid-up rider, and the policy to remain in force during continued disability.

AEECWL 10-16 – Aviation Exclusion Endorsement – Civil – This endorsement limits death benefit proceeds if the insured's death results from riding in or descending from any kind of aircraft as a hobby or sport.

AEEMWL 10-16 – Aviation Exclusion Endorsement – Military – This endorsement limits death benefit proceeds if the insured's death results from riding in or descending from any kind of aircraft by or for the military.

AHEWL 10-16 – Aviation Hazard Endorsement – This endorsement is an extra premium endorsement due to an aviation hazard.

CE 10-16 – Conversion Endorsement – This endorsement changes the policy pursuant to a conversion or exchange of a policy or rider previously issued by us. Therefore, the suicide and incontestability provisions of the policy will be deemed to run from

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the date of issue of the converted or exchanged coverage for those amounts of insurance and benefits previously in force under the replaced coverage.

EPEADB 10-16 – Extra Premium Endorsement for Accidental Death Benefit – This endorsement is an extra premium endorsement for the Accidental Death Benefit Rider due to medical impairment, special hazard or hazardous occupation.

EPEWL 10-16 – Extra Premium Endorsement – This endorsement is an extra premium endorsement if a change is made to the policy or if it is converted to a new policy.

EPEWP 10-16 – Extra Premium Endorsement for Waiver of Premium – This endorsement is an extra premium endorsement for the Waiver of Premium rider due to medical impairment, special hazard or hazardous occupation.

HOEWL 10-16 – Hazardous Occupation Endorsement – This endorsement is an extra premium endorsement due to a hazardous occupation.

REEWL 10-16 – Racing Exclusion Endorsement – This endorsement limits death benefit proceeds if the insured's death results from riding, driving or participating in any type of motor vehicle racing.

No part of this filing contains any unusual or possibly controversial items from normal company or industry standards. Since our printers use various fonts and layouts, we reserve the right to format the pages to conform to the printers requirements. No change in language will occur, only a possible page break, or renumbering of a page.

If you should have any questions, please do not hesitate to contact me at 1-800-825-1551, extension 52329 or email address at: bcramer@ameritas.com.

Sincerely,

Bobbie J. Cramer
Senior Contract Analyst

Company and Contact

Filing Contact Information

Bobbie Cramer, Senior Contract Analyst	bcramer@ameritas.com
1876 Waycross Road	800-825-1551 [Phone] 52329 [Ext]
P O Box 40888	513-595-2918 [FAX]
Cincinnati, OH 45240	

Filing Company Information

Ameritas Life Insurance Corp.	CoCode: 61301	State of Domicile: Nebraska
5900 O Street	Group Code: 943	Company Type:
P O Box 81889	Group Name:	State ID Number:
Lincoln, NE 68501-1889	FEIN Number: 47-0098400	
(800) 756-1112 ext. [Phone]		

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Filing Fees

Fee Required? No

Retaliatory? No

Fee Explanation:

State: District of Columbia

Filing Company:

Ameritas Life Insurance Corp.

TOI/Sub-TOI: L071 Individual Life - Whole/L071.101 Fixed/Indeterminate Premium - Single Life

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Form Schedule

Lead Form Number: 3017 10-16 DC

Item No.	Schedule Item Status	Form Name	Form Number	Form Type	Form Action	Action Specific Data	Readability Score	Attachments
1		Whole Life Policy	3017 10-16 DC	POL	Initial		61.000	3017 10-16 DC.pdf
2		Whole Life Policy Schedule Page	3017 P121 SCH 10-16	SCH	Initial		0.000	3017 P121 SCH 10-16.pdf
3		Whole Life Policy	3018 10-16 DC	POL	Initial		61.000	3018 10-16 DC.pdf
4		Whole Life Policy Schedule Page	3018 P100 SCH 10-16	SCH	Initial		0.000	3018 P100 SCH 10-16.pdf
5		Whole Life Policy Schedule Page	3018 P10 SCH 10-16	SCH	Initial		0.000	3018 P10 SCH 10-16.pdf
6		Accidental Death Benefit Rider	ADBRLT 10-16	POLA	Initial		57.000	ADBRLT 10-16.pdf
7		Children's Insurance Rider	CIRWL 10-16	POLA	Initial		64.000	CIRWL 10-16.pdf
8		Flexible Paid-Up Rider	FPURWL 10-16 DC	POLA	Initial		59.000	FPURWL 10-16 DC.pdf
9		Guaranteed Insurability Rider	GIRWL 10-16	POLA	Initial		65.000	GIRWL 10-16.pdf
10		Level Term Rider	LTRWL 10-16	POLA	Initial		60.000	LTRWL 10-16.pdf
11		Waiver of Premium Rider	WPRWL 10-16	POLA	Initial		51.000	WPRWL 10-16.pdf
12		Aviation Exclusion Endorsement - Civil	AEECWL 10-16	POLA	Initial		70.000	AEECWL 10-16.pdf
13		Aviation Exclusion Endorsement - Military	AEEMWL 10-16	POLA	Initial		69.000	AEEMWL 10-16.pdf
14		Aviation Hazard Endorsement	AHEWL 10-16	POLA	Initial		62.000	AHEWL 10-16.pdf
15		Conversion Endorsement	CE 10-16	POLA	Initial		61.000	CE 10-16.pdf

SERFF Tracking #:

AMFA-130772420

State Tracking #:

Company Tracking #:

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Lead Form Number: 3017 10-16 DC

Item No.	Schedule Item Status	Form Name	Form Number	Form Type	Form Action	Action Specific Data	Readability Score	Attachments
16		Extra Premium Endorsement for Accidental Death Benefit	EPEADB 10-16	POLA	Initial		61.000	EPEADB 10-16.pdf
17		Extra Premium Endorsement	EPEWL 10-16	POLA	Initial		68.000	EPEWL 10-16.pdf
18		Extra Premium Endorsement for Waiver of Premium	EPEWP 10-16	POLA	Initial		62.000	EPEWP 10-16.pdf
19		Hazardous Occupation Endorsement	HOEWL 10-16	POLA	Initial		57.000	HOEWL 10-16.pdf
20		Racing Exclusion Endorsement	REEWL 10-16	POLA	Initial		68.000	REEWL 10-16.pdf

Form Type Legend:

ADV	Advertising	AEF	Application/Enrollment Form
CER	Certificate	CERA	Certificate Amendment, Insert Page, Endorsement or Rider
DDP	Data/Declaration Pages	FND	Funding Agreement (Annuity, Individual and Group)
MTX	Matrix	NOC	Notice of Coverage
OTH	Other	OUT	Outline of Coverage
PJK	Policy Jacket	POL	Policy/Contract/Fraternal Certificate
POLA	Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider	SCH	Schedule Pages



Phone
[800-745-1112]



Fax
[402-467-7335]



Client Service Office
[PO Box 81889 / Lincoln, NE 68501]



Ameritas Life Insurance Corp. 5900 O Street / Lincoln, NE 68510 / [ameritas.com]

Insured: [John Doe]
Policy Number: [0123456789]

We will pay the death benefit proceeds to the beneficiary when we receive satisfactory proof of death of the *insured* while this policy is in force, subject to the terms of this policy.

LOOK AT THE APPLICATION FORMS. This policy is issued based on payment of the initial premium and the answers in the application (see copy attached). If all answers are not true and complete, this policy may be affected. If any past medical history has been omitted, please notify *us* within ten (10) days from the date this policy is delivered to *you*.

PLEASE READ THIS POLICY CAREFULLY. This policy is a legal contract between *you* and Ameritas Life Insurance Corp.

20-DAY RIGHT TO EXAMINE THIS POLICY. It is important to *us* that *you* are satisfied with this policy. *You* have [20] days to review this policy after *you* receive it. If this policy is a replacement for an existing policy, *you* have [30] days to review this policy after *you* receive it. If *you* are not satisfied, *you* may send it back to *us* or give it to *our* agent. In such case, this policy will be void from the beginning. We will refund the premiums paid less loans within [10] days after this policy is returned.

AMERITAS LIFE INSURANCE CORP.

[]

President

[]

Secretary

FOR ANY QUESTIONS REGARDING THIS POLICY, PLEASE CONTACT US AT [800-745-1112]. YOU MAY ALSO CONTACT YOUR STATE DEPARTMENT OF INSURANCE AT [DOI#].

Whole Life Policy - Annual Dividends
Premiums Payable for Stated Period
Participating

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PLACEHOLDER FOR POLICY SCHEDULE

This is a whole life insurance policy with premium payments payable as shown on the policy schedule. *We* will pay the death benefit if the *insured* dies while this policy is in force, subject to the terms of this policy.

DEFINITIONS

(Defined terms appear in *italics* throughout this policy.)

ATTAINED AGE. Means the issue age plus the number of completed policy years.

INSURED. Means the person shown on the policy schedule upon whose life this policy is issued.

ISSUE DATE. Means the date on which the policy begins.

POLICY DATE. Means the date from which policy months, years and anniversaries are measured. The *policy date* will be determined by *us* unless *you* request a different *policy date* that *we* approve. If the *issue date* is after the *policy date* *you* WILL NOT have life insurance coverage on the *policy date*.

LOAN BALANCE. Means the sum of all unpaid policy loans and accrued interest on policy loans. Initially, loans are derived generally from cash value.

LIEN BALANCE. Means the sum of all unpaid policy liens and accrued interest on policy liens. Initially, liens are derived generally from accelerated death benefits.

WE, US, OUR. Means Ameritas Life Insurance Corp.

WRITTEN NOTICE. Means information *we* have received at the address(es) shown on the first page of this policy which is written, is signed by *you*, and is acceptable to *us*.

YOU, YOUR. Means the owner as shown on the policy schedule unless changed. The *insured* may or may not be the owner.

OWNERSHIP

OWNERSHIP. While the *insured* is living, *you* have all rights in this policy. *Your* rights will be subject to any assignment, and to the rights of any irrevocable beneficiary. If *you* die before the *insured*, the successor owner named in the application is the new owner. If there is no successor owner, then *your* estate becomes the new owner.

Ownership of this policy may be held jointly. All joint owners must consent to any proposed changes to this policy.

CHANGE OF OWNERSHIP. *You* may change the ownership of this policy by providing *written notice*. The change will take effect on the date the *written notice* was signed by *you*, subject to any actions taken by *us* prior to the date *we* receive the *written notice*.

BENEFICIARY

BENEFICIARY. The beneficiary will receive the death benefit proceeds when the *insured* dies. The primary and any contingent beneficiaries are named in the application. If no primary beneficiary is living when the *insured* dies, *we* will pay to the contingent beneficiary. If no contingent beneficiary is living when the *insured* dies, *we* will pay *you* or *your* estate.

Unless the beneficiary designation provides otherwise, we will follow these rules:

- (1) We will pay equal shares when more than one beneficiary of the same class is to share the funds.
- (2) No revocable beneficiary has rights in this policy until the *insured* dies.
- (3) An irrevocable beneficiary cannot be changed without his or her consent.
- (4) The interest of any beneficiary is subject to the rights of any assignee shown on *our* records.
- (5) When beneficiaries are not shown by name (such as "children"), we may find who they are from sworn statements and not wait for court records.

You may change the beneficiary at any time while the *insured* is living by *written notice*. Unless you specify otherwise, the change will take effect on the date the *written notice* was signed by you. We will not be liable for any payments we make or actions we take prior to receipt of this *written notice*.

Unless otherwise provided, if any beneficiary dies within 30 days after the *insured's* death in a common disaster, that beneficiary shall be treated as having predeceased the *insured*.

DEATH BENEFIT

DEATH BENEFIT PROCEEDS. We will pay the death benefit proceeds in a lump sum when we receive satisfactory proof that the *insured* died while this policy was in force, and other proof that we may require in order to investigate the claim.

Death benefit proceeds will equal:

- (1) the amount of insurance in force at death; plus
- (2) any additional life insurance proceeds provided by riders; plus
- (3) any additional insurance provided by paid-up additions; plus
- (4) any dividend accumulations; plus
- (5) any dividend credited at death; plus
- (6) any premium refund due; minus
- (7) any *loan balance*; minus
- (8) any *lien balance*; minus
- (9) any unpaid premium, if death occurs during the grace period.

We will include interest from the *insured's* date of death to the payment date.

- (A) Interest will accrue at the rate set by the company for interest credited on death benefit proceeds. In determining the effective annual rate, we shall use the rate in effect on the date of death.
- (B) Interest will accrue at the effective annual rate determined in item (A) above, plus additional interest at a rate of 10% annually beginning with the date that is 31 calendar days from the latest of items (1), (2) and (3) below to the date the claim is paid, where it is:
 - (1) the date that we receive satisfactory proof of death of the *insured*;
 - (2) the date that we receive sufficient information to determine *our* liability, the extent of that liability, and the appropriate payee legally entitled to the proceeds; and
 - (3) the date that legal impediments to payment of proceeds that depend on the action of parties other than *us* are resolved and sufficient evidence of the same is provided to *us*. Legal impediments to payment include, but are not limited to:
 - (a) the establishment of guardianships and conservatorships;
 - (b) the appointment and qualification of trustees, executors and administrators; and
 - (c) the submission of information required to satisfy state and federal reporting requirements.

PREMIUMS

PAYMENT OF PREMIUM. Premiums are payable on or before their due dates. Premiums and premium due dates are stated on the policy schedule. The first premium is due on the *policy date*. Premium payments may be made to the address(es) shown on the first page of this policy or to such other place as we may designate. A signed receipt will be provided upon request.

Premiums may be paid annually, semiannually or quarterly at the rates that are published by *us* and in effect on the *issue date*. Premiums may be paid at other intervals approved by *us*. Premiums may not be less than \$10. *You* may request a change in premium payment interval by *written notice*.

GRACE PERIOD. A 31-day grace period is allowed for premiums not paid on or before due dates. *You* have the entire grace period within which to remit the premium payments. Premium payments sent by U.S. Mail shall be postmarked within the grace period. Insurance will continue during the grace period; however, if the *insured* dies during the grace period, the premium due will be subtracted from the death benefit.

NONPAYMENT OF PREMIUM. If a premium is not paid by the end of the grace period, the policy will lapse as of the premium due date. If the policy has no cash value or dividend value, all insurance will terminate at the time of lapse. If the policy has cash value or dividend value, insurance will continue only as explained in the Lapse Benefits provision.

PREMIUM REFUND AT DEATH. The part of any premium paid for the period after the policy month in which the *insured's* death occurs will be included in the death benefit.

DIVIDENDS

DIVIDENDS. *Your* policy will be eligible to share in *our* divisible surplus while it is in force unless the policy is being continued under the extended term insurance privilege. *We* will determine annually this policy's share, if any, and will pay as a dividend on the policy anniversary. A first year dividend, if any, is payable only when premiums have been paid for at least 12 months.

The amount of any dividend to which this policy is entitled, at any particular policy anniversary, may be adjusted up or down, to take account of:

- (1) the amount of *loan balance* outstanding during the policy year then ending;
- (2) how long that *loan balance* was outstanding; and
- (3) the rate of interest charged on that *loan balance*.

DIVIDEND OPTIONS. *You* may elect one of the four basic options described below. *We* may also make additional dividend options available.

- (1) Cash - Dividends will be paid in cash.
- (2) Reduce Premium - Dividends are used to reduce payment of the premium under this policy if the balance of the premium is paid by the end of the grace period. This dividend option is not available if premiums are paid at intervals other than annually, semiannually or quarterly.
- (3) Accumulation at Interest - Dividends are left with *us* to earn interest. Interest will be credited at an annual rate of not less than 1%. *We* may credit a higher rate.
- (4) Paid-up Additions - Dividends are used to purchase paid-up additional insurance. Paid-up additions may share in any divisible surplus.

Dividend options initially are elected in the application. *You* may change the option at any time by *written notice*. If no option has been elected, dividends will be applied to purchase paid-up additions.

You may withdraw the cash value of any paid-up additions and any dividends accumulated at interest by *written notice*.

DIVIDEND AFTER DEATH. If the *insured* dies after the first policy year, the proceeds will include a pro rata portion of any dividend allocated to this policy for the year of the *insured's* death.

ADDITIONAL POLICY PRIVILEGES

RIGHT TO CHANGE THE POLICY. You may change this policy for certain other policies subject to *our* rules. There may be a charge for the change and satisfactory evidence of insurability may be required. Upon request, we will quote the requirements and the premium of the new policy.

PAID-UP PRIVILEGE. You may request, by *written notice*, this policy be endorsed as a paid-up policy. The cash surrender value will be applied as a net single premium for a paid-up policy of the same kind and amount of insurance as this policy at the then *attained age* of the *insured*. All riders will terminate when the policy is endorsed paid-up unless otherwise provided in the rider.

ACCESSING POLICY VALUES

CASH SURRENDER. You may surrender this policy and withdraw its cash surrender value and the cash surrender value of any rider at any time during the *insured's* life by *written notice*. You may also elect to use the cash surrender value to provide lapse benefits as explained in the Lapse Benefits provision. We may require return of the policy.

CASH SURRENDER VALUE. The cash surrender value of this policy will be the sum of:

- (1) the policy's cash value; plus
- (2) the cash value of any paid-up additions; plus
- (3) the cash value of any rider; plus
- (4) any dividends accumulated at interest; plus
- (5) any due and unpaid dividend; minus
- (6) any *loan balance*; minus
- (7) any *lien balance* as of the date of surrender.

We may delay paying the cash surrender value for up to six months from the request. If the payment is delayed for more than 30 days, interest will be paid on the cash surrender value from the date of the request for withdrawal to the date of payment at an annual rate of at least the contract rate shown on the policy schedule.

CASH VALUE. The Table of Policy Values shown on the policy schedule shows the cash value of the policy, exclusive of any rider cash value, at the end of successive policy years. These values assume premiums will be paid when due. Upon request, we will furnish cash values for any date not shown in the Table.

CASH VALUE AFTER LAPSE. If this policy is in force as a lapse benefit, either as extended term insurance or paid-up insurance, you may surrender it for the then current cash surrender value by *written notice*. If the request is made within 31 days after a policy anniversary, while either of these lapse benefits is in effect, the cash surrender value will not be less than it was on that policy anniversary.

LOANS. You may obtain a loan from the maximum loan value except during the grace period. A loan may affect the amount of dividends payable under the policy. No loan will be granted if the policy is in force as extended term insurance. If a loan is taken or maintained on a paid-up policy or paid-up insurance, it will reduce the amount of the cash surrender value and death benefit proceeds accordingly. You may request that the *loan balance* be maintained by *written notice*.

The maximum loan value as of the date of the loan will be:

- (1) the policy's cash value (including the cash value of any rider); plus
- (2) the cash value of any paid-up additions; minus
- (3) any due and unpaid premium; minus
- (4) any existing *loan balance*; minus
- (5) any existing *lien balance*; minus
- (6) any loan interest from the date of the loan to the next policy anniversary.

You have the option to take less than the maximum loan value.

Cash values are computed as of the next policy anniversary or the next premium due date, whichever is earlier. Any due and unpaid premium deducted in arriving at the maximum loan value will be a loan.

Loan interest will be computed using a variable loan interest rate. Each year *we* will set the variable interest rate. The rate will never be more than the maximum permitted by law. The rate will not be changed more often than once a year. The rate for a policy year may not exceed a maximum limit which is the greater of:

- (1) the Published Monthly Average for the calendar month ending two months before the policy anniversary at the beginning of the policy year; or
- (2) the rate used in this policy to compute the guaranteed cash value for the policy year, plus 1%.

Published Monthly Average means:

- (1) Moody's Corporate Bond Yield Average -- Monthly Average Corporates, as published by Moody's Investors Service, Inc., or any successor to that service; or
- (2) if the average is no longer published, a substantially similar average, established by regulation issued by the Insurance Supervisory Official of the state in which the policy is delivered.

If the maximum limit for a policy year is at least 0.5% higher than the rate set for the previous year, *we* may increase the rate at no more than that limit. If the maximum limit for a policy year is at least 0.5% lower than the rate set for the previous year, *we* will reduce the rate to at least that limit.

We will notify *you* of the initial rate of interest when the loan is made. *We* will notify *you* of the initial rate of interest for an Automatic Premium Loan (APL) as soon as it is reasonably practical. *We* will notify *you* at least 30 days in advance of any increase in the rate for an existing loan.

This policy will not terminate in a policy year as a result of a change in the interest rate during that policy year until the time at which it would otherwise have terminated if there had been no change during the year.

Interest accrues daily and becomes a part of the *loan balance*. Interest is due on each policy anniversary and on the date the loan is repaid. If interest is not paid when due, it will be added to the *loan balance* and will bear interest at the rate charged on the loan.

This policy will be assigned to *us* as sole security for the loan. *We* may require *you* to sign a loan agreement. *We* may defer making a loan for up to six months after the application for the loan is received by *us*, except to pay premiums due on any policy in force with *us*.

You may repay the *loan balance* in full or in part at any time. If at any time the *loan balance* exceeds the cash value, this policy will terminate 31 days after the date *we* mail a notice of termination to *your* last known address and to any assignee of record.

Automatic Premium Loan (APL) may be elected in the application or, by *written notice* while no premium is in default. If the APL has been elected, any modal premium not paid before the end of its grace period will be paid by charging the premium as a loan against this policy, provided that the resulting *loan balance* and *lien balance* at the next policy anniversary does not exceed the policy's cash surrender value plus the value of any paid-up additions. If the premium cannot be paid by the APL, the Lapse Benefits provision of this policy will apply. The APL may be revoked by *you* at any time by *written notice*.

LAPSE BENEFITS

POLICY LAPSE. If a premium is not paid by the end of the grace period, this policy will lapse as of the premium due date. If the policy has no cash value or dividend value, all insurance will terminate at the time of lapse. Any cash surrender value of the policy, as of that premium due date, may be withdrawn by *you*. If the cash surrender value is not withdrawn, it will be used to continue the policy in force as extended term insurance, subject to availability, or paid-up insurance.

EXTENDED TERM INSURANCE. Extended term insurance is only available if the premium class shown on the policy schedule is Standard, Select, Preferred or Preferred Plus. This is term insurance for a limited period of time. The cash surrender value of the policy on that premium due date will be used as a net single premium at the *attained age* of the *insured* to determine the period of time that extended term insurance will continue.

The amount of extended term insurance will be determined as of the due date of the unpaid premium and will be the sum of:

- (1) the amount of insurance in force, excluding insurance provided by any term riders; plus
- (2) any additional insurance provided by paid-up additions; plus
- (3) any dividends accumulated at interest; minus
- (4) any *loan balance*; minus
- (5) any *lien balance*.

PAID-UP INSURANCE. This is paid-up insurance for the *insured's* life. The cash surrender value of the policy on the due date of the unpaid premium will be used as a net single premium at the *attained age* of the *insured* to determine the amount of paid-up insurance to be provided.

ELECTION OF LAPSE BENEFIT. If no other lapse benefit is elected, the policy will be continued as extended term insurance, if available. However, if an equal or greater amount of insurance would be provided under the paid-up insurance lapse benefit, the policy will be continued as paid-up insurance. Paid-up insurance may be elected within three months of the unpaid premium due date. Extended term insurance if available, may be elected only before the end of the grace period for the unpaid premium. The policy may be surrendered for the cash surrender value by *written notice*.

EFFECT ON RIDERS. Unless otherwise provided in any rider, on the date of lapse, all riders attached to this policy will terminate.

REINSTATEMENT. Within five years after *your* policy terminates, *you* may put this policy back in force by *written notice* if:

- (1) the *insured* provides *us* with evidence of insurability;
- (2) *you* pay all overdue premiums, with interest at the contract rate shown on the policy schedule compounded annually from the due date of each premium;
- (3) *you* repay or reinstate any *loan balance* or *lien balance* as of the lapse date. Compound interest to the date of reinstatement will be charged on any loan at the applicable policy loan interest rate during the period of a lapse.
- (4) the *insured* is alive on the date of reinstatement; and
- (5) this policy has not been surrendered.

Any application for reinstatement becomes a part of the reinstated policy.

GENERAL PROVISIONS

ASSIGNMENT. *You* may assign this policy. No assignment will be binding on *us* unless *we* receive *written notice*. Unless *you* specify otherwise, the change will take effect on the date the *written notice* was signed by *you*, subject to any actions taken by *us* prior to the date *we* receive the *written notice*. *We* will not be responsible for the validity or the tax consequences of any assignment. *Your* rights, and the rights of any beneficiary or payee, will be subject to any assignment. *We* will not be liable for any payments *we* make or actions *we* take before *we* receive *written notice* of an assignment. An assignment is subject to any *loan balance* and *lien balance*.

CLAIMS OF CREDITORS. The death benefit, before paid, will not be subject to the claims of a beneficiary's creditors, except as required by law.

COMPUTATIONS. Cash values, net single premium and lapse benefits are based on the mortality table and contract rate of interest shown on the policy schedule. Interest is compounded annually. Calculations assume that premiums will be paid continuously and that proceeds will be paid immediately upon death. Policy values for fractions of a year will be calculated on a basis to reflect the lapse of time and fractional premiums paid for the year.

Any cash values and paid-up nonforfeiture benefits available under the policy are not less than the minimum values and benefits required by the Standard Nonforfeiture Law for Life Insurance.

The cash value of any extended term insurance or paid-up additional insurance will be the net single premium for that insurance at the *attained age* of the *insured*.

ENTIRE CONTRACT. This policy is a legal contract that *you* have entered into with *us*. The entire contract consists of:

- (1) this policy;
- (2) any riders;
- (3) any endorsements;
- (4) the attached copy of the application, and any amendments or supplemental applications; and
- (5) the applicable policy schedule(s).

Any change in the contract must be written and signed by *our* President, or a Vice President, or the Secretary, or the Assistant Secretary. No one else is authorized to bind *us*.

Statements made in the application for issuance or reinstatement, in the absence of fraud, are representations and not warranties.

INCONTESTABILITY. *We* will not contest this policy after it has been in force while the *insured* is alive for two years from the *issue date*, except for nonpayment of premium. If this policy is reinstated, the contestable period will start over again beginning on the reinstatement date, but only for statements made in the application for reinstatement. Riders to this policy may have separate incontestability provisions.

MISSTATEMENT OF AGE OR GENDER. If the *insured's* age or gender has been misstated on the application, *we* will adjust the policy benefits and values to those that the most recent premium would have purchased at the correct age and gender.

RELIANCE. *We* have issued this policy based on the answers in the application and supplemental applications. *We* have assumed all such answers to be true and complete. If any are not, *we* may, subject to the Incontestability provision, have the right to void this policy and give back premiums paid, minus any *loan balance*, *lien balance* and any partial withdrawals.

SUICIDE EXCLUSION. For two years from the *issue date* or policy reinstatement, *we* will not pay the death benefit if the *insured* commits suicide (while sane or insane). *We* will void this policy and give back the premiums paid, minus any *loan balance*, *lien balance*, and any partial withdrawals. Riders to this policy may have separate suicide provisions.

Whole Life Policy - Annual Dividends
Premiums Payable for Stated Period
Participating

POLICY SCHEDULE

Policy Information

Policy Number:	[0123456789]
Insured:	[John Doe]
Issue Age and Gender:	[35, Male]
Owner:	[John Doe]
[Joint Owner(s):	Jane Doe]
Policy Date:	[January 1, 2017]
Issue Date:	[January 1, 2017]
Premium Class:	[Standard Nontobacco]
Mortality Table:	2017 CSO [Male] Composite Mortality Table, age nearest birthday
Contract Rate:	4.00% Annual

POLICY SCHEDULE

Benefit

	Amount of <u>Insurance</u>	Duration of Premium <u>Payments</u>	Annual <u>Premium</u>
Whole Life Payable to 121	\$[100,000.00]	for [86] years	\$[1,109.00]
[Waiver of Premium Rider	Premium Waiver	for 30 years	\$28.00]
[Children's Insurance Rider	\$25,000.00	for 35 years	\$144.00]

Premium

First Premium Payment Interval:		[Annual	\$1,281.00]
Premium Frequency:	Policy <u>Fee</u>	Modal <u>Premium</u>	Cumulative Annual <u>Premium</u>
Annual	\$[75.00]	\$1,281.00	\$1,281.00]
Semiannual	\$[38.50]	\$653.56	\$1,307.12]
Quarterly	\$[19.50]	\$330.64	\$1,322.56]
Monthly	\$[6.50]	\$110.21	\$1,322.52]

Due Date

Beginning On	Total Annual <u>Premium</u>
[January 01, 2017	\$1,281.00]
[January 01, 2047	\$1,253.00]
[January 01, 2052	\$1,109.00]
[January 01, 2103	\$0.00]

POLICY SCHEDULE

TABLE OF POLICY VALUES

For Policy Year Ending <u>[January 1]</u>	Cash <u>Values</u>	Paid-Up <u>Insurance</u>	Extended Term <u>Insurance to</u>	
			Years	Days
[2018	\$ 0.00	\$ 0.00	-	-
2019	0.00	0.00	-	-
2020	400.00	1,900.00	2	95
2021	1,300.00	5,977.00	6	227
2022	2,200.00	9,791.00	10	359
2023	3,100.00	13,359.00	14	316
2024	4,100.00	17,110.00	18	55
2025	5,100.00	20,615.00	20	158
2026	6,100.00	23,878.00	22	5
2027	7,100.00	26,913.00	23	52
2028	8,200.00	30,096.00	24	51
2029	9,400.00	33,401.00	24	363
2030	10,500.00	36,115.00	25	149
2031	11,800.00	39,281.00	25	321
2032	13,000.00	41,879.00	26	10
2033	14,300.00	44,577.00	26	52
2034	15,700.00	47,360.00	26	86
2035	17,100.00	49,923.00	26	78
2036	18,500.00	52,273.00	26	35
2037	20,000.00	54,703.00	25	356]
At Age				
[62	31,400.00	68,855.00	23	309
65	36,800.00	73,821.00	22	192]

These figures do not include any paid-up additions, any dividend accumulations or any dividends due and unpaid. Any policy loan will decrease the amount otherwise payable. Dividends are not guaranteed.



Phone
[800-745-1112]



Fax
[402-467-7335]



Client Service Office
[PO Box 81889 / Lincoln, NE 68501]



Ameritas Life Insurance Corp. 5900 O Street / Lincoln, NE 68510 / [ameritas.com]

Insured: [John Doe]
Policy Number: [0123456789]

We will pay the death benefit proceeds to the beneficiary when we receive satisfactory proof of death of the *insured* while this policy is in force, subject to the terms of this policy.

LOOK AT THE APPLICATION FORMS. This policy is issued based on payment of the initial premium and the answers in the application (see copy attached). If all answers are not true and complete, this policy may be affected. If any past medical history has been omitted, please notify *us* within ten (10) days from the date this policy is delivered to *you*.

PLEASE READ THIS POLICY CAREFULLY. This policy is a legal contract between *you* and Ameritas Life Insurance Corp.

20-DAY RIGHT TO EXAMINE THIS POLICY. It is important to *us* that *you* are satisfied with this policy. *You* have [20] days to review this policy after *you* receive it. If this policy is a replacement for an existing policy, *you* have [30] days to review this policy after *you* receive it. If *you* are not satisfied, *you* may send it back to *us* or give it to *our* agent. In such case, this policy will be void from the beginning. We will refund the premiums paid less loans within [10] days after this policy is returned.

AMERITAS LIFE INSURANCE CORP.

[]

President

[]

Secretary

FOR ANY QUESTIONS REGARDING THIS POLICY, PLEASE CONTACT US AT [800-745-1112]. YOU MAY ALSO CONTACT YOUR STATE DEPARTMENT OF INSURANCE AT [DOI#].

Whole Life Policy - Annual Dividends
Premiums Payable for Stated Period
Participating

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PLACEHOLDER FOR POLICY SCHEDULE

This is a whole life insurance policy with premium payments payable as shown on the policy schedule. We will pay the death benefit if the *insured* dies while this policy is in force, subject to the terms of this policy.

DEFINITIONS

(Defined terms appear in italics throughout this policy.)

ATTAINED AGE. Means the issue age plus the number of completed policy years.

INSURED. Means the person shown on the policy schedule upon whose life this policy is issued.

ISSUE DATE. Means the date on which the policy begins.

POLICY DATE. Means the date from which policy months, years and anniversaries are measured. The *policy date* will be determined by *us* unless *you* request a different *policy date* that *we* approve. If the *issue date* is after the *policy date* *you* WILL NOT have life insurance coverage on the *policy date*.

LOAN BALANCE. Means the sum of all unpaid policy loans and accrued interest on policy loans. Initially, loans are derived generally from cash value.

LIEN BALANCE. Means the sum of all unpaid policy liens and accrued interest on policy liens. Initially, liens are derived generally from accelerated death benefits.

WE, US, OUR. Means Ameritas Life Insurance Corp.

WRITTEN NOTICE. Means information *we* have received at the address(es) shown on the first page of this policy which is written, is signed by *you*, and is acceptable to *us*.

YOU, YOUR. Means the owner as shown on the policy schedule unless changed. The *insured* may or may not be the owner.

OWNERSHIP

OWNERSHIP. While the *insured* is living, *you* have all rights in this policy. *Your* rights will be subject to any assignment, and to the rights of any irrevocable beneficiary. If *you* die before the *insured*, the successor owner named in the application is the new owner. If there is no successor owner, then *your* estate becomes the new owner.

Ownership of this policy may be held jointly. All joint owners must consent to any proposed changes to this policy.

CHANGE OF OWNERSHIP. *You* may change the ownership of this policy by providing *written notice*. The change will take effect on the date the *written notice* was signed by *you*, subject to any actions taken by *us* prior to the date *we* receive the *written notice*.

BENEFICIARY

BENEFICIARY. The beneficiary will receive the death benefit proceeds when the *insured* dies. The primary and any contingent beneficiaries are named in the application. If no primary beneficiary is living when the *insured* dies, *we* will pay to the contingent beneficiary. If no contingent beneficiary is living when the *insured* dies, *we* will pay *you* or *your* estate.

Unless the beneficiary designation provides otherwise, we will follow these rules:

- (1) We will pay equal shares when more than one beneficiary of the same class is to share the funds.
- (2) No revocable beneficiary has rights in this policy until the *insured* dies.
- (3) An irrevocable beneficiary cannot be changed without his or her consent.
- (4) The interest of any beneficiary is subject to the rights of any assignee shown on *our* records.
- (5) When beneficiaries are not shown by name (such as "children"), we may find who they are from sworn statements and not wait for court records.

You may change the beneficiary at any time while the *insured* is living by *written notice*. Unless you specify otherwise, the change will take effect on the date the *written notice* was signed by you. We will not be liable for any payments we make or actions we take prior to receipt of this *written notice*.

Unless otherwise provided, if any beneficiary dies within 30 days after the *insured's* death in a common disaster, that beneficiary shall be treated as having predeceased the *insured*.

DEATH BENEFIT

DEATH BENEFIT PROCEEDS. We will pay the death benefit proceeds in a lump sum when we receive satisfactory proof that the *insured* died while this policy was in force, and other proof that we may require in order to investigate the claim.

Death benefit proceeds will equal:

- (1) the amount of insurance in force at death; plus
- (2) any additional life insurance proceeds provided by riders; plus
- (3) any additional insurance provided by paid-up additions; plus
- (4) any dividend accumulations; plus
- (5) any dividend credited at death; plus
- (6) any premium refund due; minus
- (7) any *loan balance*; minus
- (8) any *lien balance*; minus
- (9) any unpaid premium, if death occurs during the grace period.

We will include interest from the *insured's* date of death to the payment date.

- (A) Interest will accrue at the rate set by the company for interest credited on death benefit proceeds. In determining the effective annual rate, we shall use the rate in effect on the date of death.
- (B) Interest will accrue at the effective annual rate determined in item (A) above, plus additional interest at a rate of 10% annually beginning with the date that is 31 calendar days from the latest of items (1), (2) and (3) below to the date the claim is paid, where it is:
 - (1) the date that we receive satisfactory proof of death of the *insured*;
 - (2) the date that we receive sufficient information to determine *our* liability, the extent of that liability, and the appropriate payee legally entitled to the proceeds; and
 - (3) the date that legal impediments to payment of proceeds that depend on the action of parties other than *us* are resolved and sufficient evidence of the same is provided to *us*. Legal impediments to payment include, but are not limited to:
 - (a) the establishment of guardianships and conservatorships;
 - (b) the appointment and qualification of trustees, executors and administrators; and
 - (c) the submission of information required to satisfy state and federal reporting requirements.

PREMIUMS

PAYMENT OF PREMIUM. Premiums are payable on or before their due dates. Premiums and premium due dates are stated on the policy schedule. The first premium is due on the *policy date*. Premium payments may be made to the address(es) shown on the first page of this policy or to such other place as we may designate. A signed receipt will be provided upon request.

Premiums may be paid annually, semiannually or quarterly at the rates that are published by *us* and in effect on the *issue date*. Premiums may be paid at other intervals approved by *us*. Premiums may not be less than \$10. *You* may request a change in premium payment interval by *written notice*.

GRACE PERIOD. A 31-day grace period is allowed for premiums not paid on or before due dates. *You* have the entire grace period within which to remit the premium payments. Premium payments sent by U.S. Mail shall be postmarked within the grace period. Insurance will continue during the grace period; however, if the *insured* dies during the grace period, the premium due will be subtracted from the death benefit.

NONPAYMENT OF PREMIUM. If a premium is not paid by the end of the grace period, the policy will lapse as of the premium due date. If the policy has no cash value or dividend value, all insurance will terminate at the time of lapse. If the policy has cash value or dividend value, insurance will continue only as explained in the Lapse Benefits provision.

PREMIUM REFUND AT DEATH. The part of any premium paid for the period after the policy month in which the *insured's* death occurs will be included in the death benefit.

DIVIDENDS

DIVIDENDS. *Your* policy will be eligible to share in *our* divisible surplus while it is in force unless the policy is being continued under the extended term insurance privilege. *We* will determine annually this policy's share, if any, and will pay as a dividend on the policy anniversary. A first year dividend, if any, is payable only when premiums have been paid for at least 12 months.

The amount of any dividend to which this policy is entitled, at any particular policy anniversary, may be adjusted up or down, to take account of:

- (1) the amount of *loan balance* outstanding during the policy year then ending;
- (2) how long that *loan balance* was outstanding; and
- (3) the rate of interest charged on that *loan balance*.

DIVIDEND OPTIONS. *You* may elect one of the four basic options described below. *We* may also make additional dividend options available.

- (1) Cash - Dividends will be paid in cash.
- (2) Reduce Premium - Dividends are used to reduce payment of the premium under this policy if the balance of the premium is paid by the end of the grace period. This dividend option is not available if premiums are paid at intervals other than annually, semiannually or quarterly.
- (3) Accumulation at Interest - Dividends are left with *us* to earn interest. Interest will be credited at an annual rate of not less than 1%. *We* may credit a higher rate.
- (4) Paid-up Additions - Dividends are used to purchase paid-up additional insurance. Paid-up additions may share in any divisible surplus.

Dividend options initially are elected in the application. *You* may change the option at any time by *written notice*. If no option has been elected, dividends will be applied to purchase paid-up additions.

You may withdraw the cash value of any paid-up additions and any dividends accumulated at interest by *written notice*.

DIVIDEND AFTER DEATH. If the *insured* dies after the first policy year, the proceeds will include a pro rata portion of any dividend allocated to this policy for the year of the *insured's* death.

ADDITIONAL POLICY PRIVILEGES

RIGHT TO CHANGE THE POLICY. You may change this policy for certain other policies subject to *our* rules. There may be a charge for the change and satisfactory evidence of insurability may be required. Upon request, we will quote the requirements and the premium of the new policy.

PAID-UP PRIVILEGE. You may request, by *written notice*, this policy be endorsed as a paid-up policy. The cash surrender value will be applied as a net single premium for a paid-up policy of the same kind and amount of insurance as this policy at the then *attained age* of the *insured*. All riders will terminate when the policy is endorsed paid-up unless otherwise provided in the rider.

ACCESSING POLICY VALUES

CASH SURRENDER. You may surrender this policy and withdraw its cash surrender value and the cash surrender value of any rider at any time during the *insured's* life by *written notice*. You may also elect to use the cash surrender value to provide lapse benefits as explained in the Lapse Benefits provision. We may require return of the policy.

CASH SURRENDER VALUE. The cash surrender value of this policy will be the sum of:

- (1) the policy's cash value; plus
- (2) the cash value of any paid-up additions; plus
- (3) the cash value of any rider; plus
- (4) any dividends accumulated at interest; plus
- (5) any due and unpaid dividend; minus
- (6) any *loan balance*; minus
- (7) any *lien balance* as of the date of surrender.

We may delay paying the cash surrender value for up to six months from the request. If the payment is delayed for more than 30 days, interest will be paid on the cash surrender value from the date of the request for withdrawal to the date of payment at an annual rate of at least the contract rate shown on the policy schedule.

CASH VALUE. The Table of Policy Values shown on the policy schedule shows the cash value of the policy, exclusive of any rider cash value, at the end of successive policy years. These values assume premiums will be paid when due. Upon request, we will furnish cash values for any date not shown in the Table.

CASH VALUE AFTER LAPSE. If this policy is in force as a lapse benefit, either as extended term insurance or paid-up insurance, you may surrender it for the then current cash surrender value by *written notice*. If the request is made within 31 days after a policy anniversary, while either of these lapse benefits is in effect, the cash surrender value will not be less than it was on that policy anniversary.

LOANS. You may obtain a loan from the maximum loan value except during the grace period. A loan may affect the amount of dividends payable under the policy. No loan will be granted if the policy is in force as extended term insurance. If a loan is taken or maintained on a paid-up policy or paid-up insurance, it will reduce the amount of the cash surrender value and death benefit proceeds accordingly. You may request that the *loan balance* be maintained by *written notice*.

The maximum loan value as of the date of the loan will be:

- (1) the policy's cash value (including the cash value of any rider); plus
- (2) the cash value of any paid-up additions; minus
- (3) any due and unpaid premium; minus
- (4) any existing *loan balance*; minus
- (5) any existing *lien balance*; minus
- (6) any loan interest from the date of the loan to the next policy anniversary.

You have the option to take less than the maximum loan value.

Cash values are computed as of the next policy anniversary or the next premium due date, whichever is earlier. Any due and unpaid premium deducted in arriving at the maximum loan value will be a loan.

The maximum loan interest rate is shown on the policy schedule. *We* have the option of charging less.

Interest accrues daily and becomes a part of the *loan balance*. Interest is due on each policy anniversary and on the date the loan is repaid. If interest is not paid when due, it will be added to the *loan balance* and will bear interest at the rate charged on the loan.

This policy will be assigned to *us* as sole security for the loan. *We* may require *you* to sign a loan agreement. *We* may defer making a loan for up to six months after the application for the loan is received by *us*, except to pay premiums due on any policy in force with *us*.

You may repay the *loan balance* in full or in part at any time. If at any time the *loan balance* exceeds the cash value, this policy will terminate 31 days after the date *we* mail a notice of termination to *your* last known address and to any assignee of record.

Automatic Premium Loan (APL) may be elected in the application or, by *written notice* while no premium is in default. If the APL has been elected, any modal premium not paid before the end of its grace period will be paid by charging the premium as a loan against this policy, provided that the resulting *loan balance* and *lien balance* at the next policy anniversary does not exceed the policy's cash surrender value plus the value of any paid-up additions. If the premium cannot be paid by the APL, the Lapse Benefits provision of this policy will apply. The APL may be revoked by *you* at any time by *written notice*.

LAPSE BENEFITS

POLICY LAPSE. If a premium is not paid by the end of the grace period, this policy will lapse as of the premium due date. If the policy has no cash value or dividend value, all insurance will terminate at the time of lapse. Any cash surrender value of the policy, as of that premium due date, may be withdrawn by *you*. If the cash surrender value is not withdrawn, it will be used to continue the policy in force as extended term insurance, subject to availability, or paid-up insurance.

EXTENDED TERM INSURANCE. Extended term insurance is only available if the premium class shown on the policy schedule is Standard, Select, Preferred or Preferred Plus. This is term insurance for a limited period of time. The cash surrender value of the policy on that premium due date will be used as a net single premium at the *attained age* of the *insured* to determine the period of time that extended term insurance will continue.

The amount of extended term insurance will be determined as of the due date of the unpaid premium and will be the sum of:

- (1) the amount of insurance in force, excluding insurance provided by any term riders; plus
- (2) any additional insurance provided by paid-up additions; plus
- (3) any dividends accumulated at interest; minus
- (4) any *loan balance*; minus
- (5) any *lien balance*.

PAID-UP INSURANCE. This is paid-up insurance for the *insured's* life. The cash surrender value of the policy on the due date of the unpaid premium will be used as a net single premium at the *attained age* of the *insured* to determine the amount of paid-up insurance to be provided.

ELECTION OF LAPSE BENEFIT. If no other lapse benefit is elected, the policy will be continued as extended term insurance, if available. However, if an equal or greater amount of insurance would be provided under the paid-up insurance lapse benefit, the policy will be continued as paid-up insurance. Paid-up insurance may be elected within three months of the unpaid premium due date. Extended term insurance, if available, may be elected only before the end of the grace period for the unpaid premium. The policy may be surrendered for the cash surrender value by *written notice*.

EFFECT ON RIDERS. Unless otherwise provided in any rider, on the date of lapse, all riders attached to this policy will terminate.

REINSTATEMENT. Within five years after *your* policy terminates, *you* may put this policy back in force by *written notice* if:

- (1) the *insured* provides *us* with evidence of insurability;
- (2) *you* pay all overdue premiums, with interest at the contract rate shown on the policy schedule compounded annually from the due date of each premium;
- (3) *you* repay or reinstate any *loan balance* or *lien balance* as of the lapse date. Compound interest to the date of reinstatement will be charged on any loan at the applicable policy loan interest rate during the period of a lapse.
- (4) the *insured* is alive on the date of reinstatement; and
- (5) this policy has not been surrendered.

Any application for reinstatement becomes a part of the reinstated policy.

GENERAL PROVISIONS

ASSIGNMENT. *You* may assign this policy. No assignment will be binding on *us* unless *we* receive *written notice*. Unless *you* specify otherwise, the change will take effect on the date the *written notice* was signed by *you*, subject to any actions taken by *us* prior to the date *we* receive the *written notice*. *We* will not be responsible for the validity or the tax consequences of any assignment. *Your* rights, and the rights of any beneficiary or payee, will be subject to any assignment. *We* will not be liable for any payments *we* make or actions *we* take before *we* receive *written notice* of an assignment. An assignment is subject to any *loan balance* and *lien balance*.

CLAIMS OF CREDITORS. The death benefit, before paid, will not be subject to the claims of a beneficiary's creditors, except as required by law.

COMPUTATIONS. Cash values, net single premium and lapse benefits are based on the mortality table and contract rate of interest shown on the policy schedule. Interest is compounded annually. Calculations assume that premiums will be paid continuously and that proceeds will be paid immediately upon death. Policy values for fractions of a year will be calculated on a basis to reflect the lapse of time and fractional premiums paid for the year.

Any cash values and paid-up nonforfeiture benefits available under the policy are not less than the minimum values and benefits required by the Standard Nonforfeiture Law for Life Insurance.

The cash value of any extended term insurance or paid-up additional insurance will be the net single premium for that insurance at the *attained age* of the *insured*.

ENTIRE CONTRACT. This policy is a legal contract that *you* have entered into with *us*. The entire contract consists of:

- (1) this policy;
- (2) any riders;
- (3) any endorsements;
- (4) the attached copy of the application, and any amendments or supplemental applications; and
- (5) the applicable policy schedule(s).

Any change in the contract must be written and signed by *our* President, or a Vice President, or the Secretary, or the Assistant Secretary. No one else is authorized to bind *us*.

Statements made in the application for issuance or reinstatement, in the absence of fraud, are representations and not warranties.

INCONTESTABILITY. *We* will not contest this policy after it has been in force while the *insured* is alive for two years from the *issue date*, except for nonpayment of premiums. If this policy is reinstated, the contestable period will start over again beginning on the reinstatement date, but only for statements made in the application for reinstatement. Riders to this policy may have separate incontestability provisions.

MISSTATEMENT OF AGE OR GENDER. If the *insured's* age or gender has been misstated on the application, *we* will adjust the policy benefits and values to those that the most recent premium would have purchased at the correct age and gender.

RELIANCE. *We* have issued this policy based on the answers in the application and supplemental applications. *We* have assumed all such answers to be true and complete. If any are not, *we* may, subject to the Incontestability provision, have the right to void this policy and give back premiums paid, minus any *loan balance*, *lien balance* and any partial withdrawals.

SUICIDE EXCLUSION. For two years from the *issue date* or policy reinstatement, *we* will not pay the death benefit if the *insured* commits suicide (while sane or insane). *We* will void this policy and give back the premiums paid, minus any *loan balance*, *lien balance*, and any partial withdrawals. Riders to this policy may have separate suicide provisions.

Whole Life Policy - Annual Dividends
Premiums Payable for Stated Period
Participating

POLICY SCHEDULE

Policy Information

Policy Number:	[0123456789]
Insured:	[John Doe]
Issue Age and Gender:	[35, Male]
Owner:	[John Doe]
[Joint Owner(s):	Jane Doe]
Policy Date:	[January 1, 2017]
Issue Date:	[January 1, 2017]
Premium Class:	[Standard Nontobacco]
Mortality Table:	2017 CSO [Male] Composite Mortality Table, age nearest birthday
Contract Rate:	4.00% Annual
Maximum Loan Interest Rate:	[5.00]% Annual

POLICY SCHEDULE

Benefit

	<u>Amount of Insurance</u>	<u>Duration of Premium Payments</u>	<u>Annual Premium</u>
Whole Life Payable to 100	\$[100,000.00]	for [65] years	\$1,196.00]
[Accidental Death Benefit Rider	\$100,000.00	for 35 years	\$83.00]
[Level Term Rider	\$100,000.00	for 65 years	\$64.00#]
[Guaranteed Insurability Rider	\$25,000.00	for 5 years	\$56.25]
[Flexible Paid-Up Rider:			
Schedule Premium	See page 3C	for 55 years	\$200.00
Received Premium \$200.00		Single]	

Premium

First Premium Payment Interval:	[*Annual	\$1,399.25]
[Flexible Paid-Up Rider Scheduled Payment Amount:	**Annual	\$200.00]

Premium Frequency:	<u>Policy Fee</u>	<u>Modal Premium</u>	<u>Cumulative Annual Premium</u>
Annual	\$[0.00	\$1,599.25	\$1,599.25]
Semiannual	\$[0.00	\$813.62	\$1,627.24]
Quarterly	\$[0.00	\$411.00	\$1,644.00]
Monthly	\$[0.00	\$137.01	\$1,644.08]

Due Date

Beginning On	<u>Total Annual Premium</u>
[January 01, 2017	\$1,599.25]#
[January 01, 2018	\$1,399.25]#
[January 01, 2022	\$1,543.00]#
[January 01, 2052	\$8,626.00]#
[January 01, 2072	\$56,714.00]#
[January 01, 2082	\$0.00]

[* Does not include Flexible Paid-Up Rider Premium]

[** Premium Load is applied as shown on Page 3C]

[# The initial annual premium shown here applied only during the [10] year term period for the level term rider. Thereafter, the premium rates increase each year as shown in the table of maximum annual premiums for the level term rider. The term period and the table of maximum annual premiums for the level term rider are shown on the following policy schedule pages.]

POLICY SCHEDULE

TABLE OF POLICY VALUES

For Policy Year Ending <u>[January 1]</u>	Cash <u>Values</u>	Paid-Up <u>Insurance</u>	Extended Term <u>Insurance to</u>	
			Years	Days
[2018	\$ 0.00	\$ 0.00	-	-
2019	0.00	0.00	-	-
2020	400.00	1,900.00	2	95
2021	1,300.00	5,977.00	6	227
2022	2,200.00	9,791.00	10	359
2023	3,100.00	13,359.00	14	316
2024	4,100.00	17,110.00	18	55
2025	5,100.00	20,615.00	20	158
2026	6,100.00	23,878.00	22	5
2027	7,100.00	26,913.00	23	52
2028	8,200.00	30,096.00	24	51
2029	9,400.00	33,401.00	24	363
2030	10,500.00	36,115.00	25	149
2031	11,800.00	39,281.00	25	321
2032	13,000.00	41,879.00	26	10
2033	14,300.00	44,577.00	26	52
2034	15,700.00	47,360.00	26	86
2035	17,100.00	49,923.00	26	78
2036	18,500.00	52,273.00	26	35
2037	20,000.00	54,703.00	25	356]
At Age				
[62	31,400.00	68,855.00	23	309
65	36,800.00	73,821.00	22	192]

These figures do not include any paid-up additions, any dividend accumulations or any dividends due and unpaid. Any policy loan will decrease the amount otherwise payable. Dividends are not guaranteed.

POLICY SCHEDULE

Flexible Paid-Up Rider

Annual Funding Range: [70-120]% of scheduled annual premium
Expense Charge: [5]% up to [150]% of annual base policy premium
[8]% for amounts exceeding [150]% of annual base policy premium
Expiration Date: [January 1, 2072]
Flexible Paid-Up Rider premiums can be skipped or reduced for [2] years

For Policy Year Beginning <u>[January 1]</u>	<u>Net Premium</u>	Net Single Premiums Per \$1,000 of <u>Paid-Up Insurance</u>	End of Year Cash Values Per \$1,000 of <u>Paid-Up Insurance</u>
[2017	\$190.00	\$190.51	\$197.01
2018	190.00	197.01	203.66
2019	190.00	203.66	210.50
2020	190.00	210.50	217.51
2021	190.00	217.51	224.69
2022	190.00	224.69	232.06
2023	190.00	232.06	239.62
2024	190.00	239.62	247.39
2025	190.00	247.39	255.46
2026	190.00	255.46	263.81
2027	190.00	263.81	272.46
2028	190.00	272.46	281.43
2029	190.00	281.43	290.74
2030	190.00	290.74	300.40
2031	190.00	300.40	310.42
2032	190.00	310.42	320.79
2033	190.00	320.79	331.50
2034	190.00	331.50	342.53
2035	190.00	342.53	353.91
2036	190.00	353.91	365.61
2037	190.00	365.61	377.63
2038	190.00	377.63	389.97
2039	190.00	389.97	402.62
2040	190.00	402.62	415.57
2041	190.00	415.57	428.80
2042	190.00	428.80	442.30
2043	190.00	442.30	456.03
2044	190.00	456.03	469.99
2045	190.00	469.99	484.15
2046	190.00	484.15	498.50
2047	190.00	498.50	513.04
2048	190.00	513.04	527.79
2049	190.00	527.79	542.76
2050	190.00	542.76	557.94
2051	190.00	557.94	573.33
2052	190.00	573.33	588.86
2053	190.00	588.86	604.49
2054	190.00	604.49	620.14
2055	190.00	620.14	635.75
2056	190.00	635.75	651.28
2057	190.00	651.28	666.71
2058	190.00	666.71	682.06
2059	190.00	682.06	697.34

POLICY SCHEDULE

Flexible Paid-Up Rider

For Policy Year Beginning <u>[January 1]</u>	<u>Net Premium</u>	Net Single Premiums Per \$1,000 of <u>Paid-Up Insurance</u>	End of Year Cash Values Per \$1,000 of <u>Paid-Up Insurance</u>
2060	\$190.00	\$697.34	\$ 712.56
2061	190.00	712.56	727.69
2062	190.00	727.69	742.68
2063	190.00	742.68	757.48
2064	190.00	757.48	772.09
2065	190.00	772.09	786.29
2066	190.00	786.29	800.02
2067	190.00	800.02	813.15
2068	190.00	813.15	825.57
2069	190.00	825.57	837.18
2070	190.00	837.18	847.86
2071	190.00	847.86	857.61
2072			866.42
2073			874.37
2074			881.59
2075			888.20
2076			894.47
2077			900.83
2078			906.92
2079			912.72
2080			918.13
2081			923.08
2082			927.47
2083			931.47
2084			935.08
2085			938.37
2086			941.40
2087			944.38
2088			947.71
2089			950.91
2090			953.98
2091			956.94
2092			959.78
2093			962.50
2094			965.12
2095			967.63
2096			970.04
2097			972.35
2098			974.56
2099			976.68
2100			978.70
2101			980.64
2102			1,000.00]

POLICY SCHEDULE

Level Term Rider

Term Period: [10] Years
 Conversion Period Ends: [January 1, 2057]
 Expiration Date: [January 1, 2082]

Table of Maximum Annual Premiums

For Policy Year Beginning <u>[January 1]</u>	Guaranteed Maximum <u>Premium</u>	For Policy Year Beginning <u>[January 1]</u>	Guaranteed Maximum <u>Premium</u>
[2017	\$ 64.00	2056	\$ 7,296.00
2018	64.00	2057	8,260.00
2019	64.00	2058	9,320.00
2020	64.00	2059	10,484.00
2021	64.00	2060	11,776.00
2022	64.00	2061	13,252.00
2023	64.00	2062	14,952.00
2024	64.00	2063	16,944.00
2025	64.00	2064	19,180.00
2026	64.00	2065	21,784.00
2027	608.00	2066	24,800.00
2028	636.00	2067	28,312.00
2029	656.00	2068	32,380.00
2030	684.00	2069	37,064.00
2031	716.00	2070	42,368.00
2032	752.00	2071	48,128.00
2033	808.00	2072	54,280.00
2034	880.00	2073	60,612.00
2035	964.00	2074	66,948.00
2036	1,052.00	2075	73,232.00
2037	1,140.00	2076	79,144.00
2038	1,220.00	2077	84,432.00
2039	1,300.00	2078	91,116.00
2040	1,380.00	2079	95,000.00
2041	1,476.00	2080	95,000.00
2042	1,596.00	2081	95,000.00]
2043	1,752.00		
2044	1,948.00		
2045	2,172.00		
2046	2,420.00		
2047	2,692.00		
2048	2,980.00		
2049	3,292.00		
2050	3,632.00		
2051	4,024.00		
2052	4,480.00		
2053	5,028.00		
2054	5,676.00		
2055	6,432.00		

POLICY SCHEDULE

Policy Information

Policy Number:	[0123456789]
Insured:	[John Doe]
Issue Age and Gender:	[35, Male]
Owner:	[John Doe]
[Joint Owner(s):	Jane Doe]
Policy Date:	[January 1, 2017]
Issue Date:	[January 1, 2017]
Premium Class:	[Standard Nontobacco]
Mortality Table:	2017 CSO [Male] Composite Mortality Table, age nearest birthday
Contract Rate:	4.00% Annual
Maximum Loan Interest Rate:	[5.00]% Annual

POLICY SCHEDULE

Benefit

	<u>Amount of Insurance</u>	<u>Duration of Premium Payments</u>	<u>Annual Premium</u>
Whole Life Payable for 10 years	[\$100,000.00]	for 10 years	[\$2,959.00]

Premium

First Premium Payment Interval:	[Annual]	\$2,959.00]
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Premium Frequency:	<u>Policy Fee</u>	<u>Modal Premium</u>	<u>Cumulative Annual Premium</u>
Annual	[\$0.00]	\$2,959.00	\$2,959.00]
Semiannual	[\$0.00]	\$1,509.09	\$3,018.18]
Quarterly	[\$0.00]	\$763.42	\$3,053.68]
Monthly	[\$0.00]	\$254.47	\$3,053.64]

Due Date

	<u>Total Annual Premium</u>
Beginning On	
[January 01, 2017	\$2,959.00]
[January 01, 2027	\$0.00]

POLICY SCHEDULE

TABLE OF POLICY VALUES

For Policy Year Ending <u>[January 1]</u>	Cash <u>Values</u>	Paid-Up <u>Insurance</u>	Extended Term <u>Insurance to</u> Years Days	
[2018	\$ 0.00	\$ 0.00	-	-
2019	1,300.00	6,383.00	7	142
2020	4,100.00	19,477.00	21	256
2021	6,900.00	31,723.00	29	227
2022	9,900.00	44,061.00	34	298
2023	12,900.00	55,589.00	38	116
2024	16,100.00	67,190.00	41	129
2025	19,400.00	78,419.00	44	21
2026	22,900.00	89,642.00	47	58
2027	26,400.00	PAID UP	PAID	UP
2028	27,300.00	PAID UP	PAID	UP
2029	28,200.00	PAID UP	PAID	UP
2030	29,100.00	PAID UP	PAID	UP
2031	30,100.00	PAID UP	PAID	UP
2032	31,100.00	PAID UP	PAID	UP
2033	32,100.00	PAID UP	PAID	UP
2034	33,200.00	PAID UP	PAID	UP
2035	34,300.00	PAID UP	PAID	UP
2036	35,400.00	PAID UP	PAID	UP
2037	36,600.00	PAID UP	PAID	UP]
At Age				
[62	45,700.00	PAID UP	PAID	UP
65	49,900.00	PAID UP	PAID	UP]

These figures do not include any paid-up additions, any dividend accumulations or any dividends due and unpaid. Any policy loan will decrease the amount otherwise payable. Dividends are not guaranteed.

Ameritas Life Insurance Corp.

ACCIDENTAL DEATH BENEFIT RIDER

RIDER SPECIFICATIONS. The amount of insurance and premium for this rider are shown on the policy schedule. The *issue date* of this rider is the same as the policy except when this rider is issued at a later date. If this rider is issued after the policy is issued, a supplemental policy schedule will be issued reflecting the specifications for this rider.

CONTRACT. This rider is made a part of the policy and is based on the application for this rider and supplemental applications for this rider and payment of the premium.

PAYMENT OF INSURANCE. We will pay the amount of insurance under this rider to *your* beneficiary when we receive satisfactory proof of the *insured's* death, if:

- (1) death occurred within 180 days of the date of injury;
- (2) resulted from an injury which occurred while this rider was in force; and
- (3) resulted from accidental bodily injury, directly and independently of all other causes. Except in the case of drowning or internal injuries revealed by an autopsy, the injury must be evidenced by a visible bruise or wound on the body.

If death results from the *insured's* travel as a fare-paying passenger on a public conveyance operated by a licensed common carrier for passenger service, the benefit amount will be doubled.

RISKS NOT ASSUMED. The benefit amount under this rider will not be payable if the *insured's* death results from, or is contributed to by, any of the following causes:

- (1) suicide or attempted suicide, or intentionally self-inflicted injury, while sane or insane;
- (2) any disease or infirmity of mind or body; or medical or surgical treatment for such disease or infirmity;
- (3) an infection not occurring as a direct result or consequence of the accidental bodily injury;
- (4) an act of declared or undeclared war, whether or not the *insured* is a member of any armed forces;
- (5) any active participation in a riot, insurrection or terrorist activity;
- (6) while the *insured* is incarcerated;
- (7) an attempt to commit, or commission of, an assault or felony;
- (8) voluntary intake or use by any means of:
 - (a) any drug, unless prescribed or administered by a physician and taken in accordance with the physician's instructions; or
 - (b) poison, gas or fumes, unless a direct result of an occupational accident;
- (9) intoxication as defined by the jurisdiction where the accident occurred;
- (10) riding in or driving an air, land or water vehicle in a race, speed or endurance contest;
- (11) before the *insured's* first birthday;
- (12) bungee jumping;
- (13) participation in an illegal occupation or activity;
- (14) rock or mountain climbing;
- (15) aeronautics (hang-gliding, skydiving, parachuting, ultralight, soaring, ballooning and parasailing);
- (16) riding in or descending from any kind of aircraft;
 - (a) as a passenger in any aircraft operated by or for the armed forces;
 - (b) as a participant in a sporting event or hobby; or
 - (c) as a pilot, crew member or participant in training. Crew member includes anyone who has duties at any time on the flight involving either the flight or the aircraft; or
- (17) travel in an aircraft or device used for testing or experimental purposes, used by or for any military authority, used for travel beyond the earth's atmosphere.

RIGHT TO EXAMINE. We have the right to examine the *insured's* body and to have an autopsy performed, at *our* expense, unless prohibited by law.

TERMINATION. This rider will terminate at the earliest of:

- (1) when any premium for the policy is due and unpaid beyond the end of the premium's grace period;
- (2) when the policy is changed to a paid-up policy, if applicable;
- (3) when the policy is changed to extended term insurance, if applicable;
- (4) when the policy terminates;
- (5) the anniversary nearest the *insured's* 70th birthday; or
- (6) the date *we* receive *written notice* from *you* requesting termination of this rider.

INCONTESTABILITY AND SUICIDE EXCLUSION. As applied to this rider, the policy contestable and suicide periods shall be measured from the *issue date* of this rider.

VALUES. This rider does not have cash value or loan value.

AMERITAS LIFE INSURANCE CORP.

[SPECIMEN]

President

[SPECIMEN]

Secretary

Ameritas Life Insurance Corp.

CHILDREN'S INSURANCE RIDER

RIDER SPECIFICATIONS. The amount of term insurance and premium for this rider are shown on the policy schedule. The *issue date* of this rider is the same as the policy except when this rider is issued at a later date. If this rider is issued after the policy is issued, a supplemental policy schedule will be issued reflecting the specifications for this rider.

CONTRACT. This rider is made a part of the policy and is based on the application and any supplemental applications for this rider and payment of the premium.

PERSONS INSURED. This rider insures each child of the *insured* if the child is:

- (1) named in the application for this rider;
- (2) born after the date of the application; or
- (3) adopted by the *insured* after the date of the application and before the child's 18th birthday.

This rider does not insure any child less than 15 days old nor after the child's 25th birthday.

PAYMENT OF INSURANCE. We will pay the amount of insurance under this rider when we receive satisfactory proof that an insured child died while this rider is in force. Unless otherwise provided, the benefit will be paid to:

- (1) the *insured*, if living; otherwise
- (2) the *insured's* spouse, if any; otherwise
- (3) the estate of the deceased child.

DEATH OF INSURED. If the *insured* dies (except by suicide within two years of the *issue date* of this rider) while this rider is in force, the payment of premiums for this rider will be waived. Conversion will be allowed as provided by this rider. If the *insured* commits suicide during the first two years of the policy, there is a 31 day period for conversion for each insured child.

CONVERSION PRIVILEGE. This rider may be converted in that year to an individual life insurance policy on each insured child, without evidence of insurability subject to *our* rules as to the minimum amount, plan of insurance and age at issue, which are in effect on the date of conversion, if:

- (1) no premium is in default and this rider is in force on that date;
- (2) we receive a written application no later than 31 days after the insured child's 25th birthday; and
- (3) the new policy is any one of the permanent policies issued by *us* at the time of conversion.

Before the insured child's 25th birthday, the amount of the new policy may not exceed the amount of insurance of the rider on the date of conversion. On or after the insured child's 25th birthday, the amount of insurance of the new policy may not exceed five times the amount of insurance of this rider on the date of conversion.

The *policy date* of the new policy will be the date of conversion. Insurance under this rider on that insured child will terminate on the date of conversion.

TERMINATION. This rider will terminate at the earliest of:

- (1) when any premium for the policy is due and unpaid beyond the end of the premium's grace period;
- (2) when the policy is changed to a paid-up policy, if applicable;
- (3) when the policy is changed to extended term insurance, if applicable;
- (4) when the policy terminates for any reason other than the death of the *insured*;
- (5) the policy anniversary nearest the *insured's* 70th birthday;
- (6) when the death of the *insured* by suicide within two years from the *issue date* of this rider; or
- (7) the date *we* receive *written notice* from *you* requesting termination of this rider.

REINSTATEMENT. This rider may be reinstated upon reinstatement of the policy, if *you* provide *us* with evidence of insurability on each insured child. If this rider is reinstated, the contestable period will start over again beginning on the reinstatement date, but only for statements made in the application for reinstatement.

INCONTESTABILITY. *We* will not contest this rider, in the absence of fraud, with respect to each insured child after the amount of insurance on that child has been in force during that child's life for two years. *Our* total liability will be to return the premiums paid while the insurance on that child's life was in force. If this rider is reinstated, the contestable period will start over again beginning on the reinstatement date, but only for statements made in the application for reinstatement.

SUICIDE EXCLUSION. If any insured child under this rider commits suicide (while sane or insane) within two years after the date that child's insurance starts, *our* total liability will be to return the premiums paid for this rider while the insurance on that child was in force.

VALUES. This rider does not have cash value or loan value.

AMERITAS LIFE INSURANCE CORP.

[SPECIMEN]

President

[SPECIMEN]

Secretary

Ameritas Life Insurance Corp.

FLEXIBLE PAID-UP RIDER

RIDER SPECIFICATIONS. The amount of paid-up insurance for the first rider year, premiums, expense charges and Annual Funding Range for this rider are shown on the policy schedule. The *issue date* of this rider is the same as the policy except when this rider is issued at a later date. If this rider is issued after the policy is issued, a supplemental policy schedule will be issued reflecting the specifications for this rider. If the policy should lapse, this rider may be reinstated only with *our* consent.

CONTRACT. This Flexible Paid Up Rider (FPUR) is made a part of the policy and is based on the application and any supplemental applications for this rider and payment of the premium.

PAYMENT OF INSURANCE. We will pay the amount of paid-up insurance under this rider minus any *loan balance* and *lien balance* to *your* beneficiary when we receive satisfactory proof of the *insured's* death. The amount of paid-up insurance under this rider will be part of the death benefit proceeds payable under the policy.

AMOUNT OF INSURANCE. On any anniversary of this rider, *you* may request a change to the annual amount of paid-up insurance. After the first year, we reserve the right to request evidence of insurability for amounts purchased using premiums over the FPUR Annual Funding Range as shown on the policy schedule.

PREMIUM LIMITATIONS. The policy schedule shows the premiums for this rider. The premiums may have a payment duration of Single, a designated number of years, or both. Premiums with a payment duration of Single may only be paid in the first year of this rider and are labeled Received Premium on the policy schedule. The Received Premium may exceed the annual Scheduled Premium, which may be paid for a number of years. In the second year, the maximum annual Scheduled Premium will be the lesser of the Scheduled Premium and the actual premiums paid in the first year for the Scheduled Premium. After the first policy year, Scheduled Premiums may be reduced or skipped for the number of years shown on the policy schedule without reducing or terminating the Scheduled Premiums in future years. The policy schedule lists the FPUR Annual Funding Range. This shows the range within which Scheduled Premiums may vary in subsequent policy years. The allowable annual Scheduled Premiums will be reduced for future years, if the actual premiums paid, in the number of years shown on the policy schedule as being able to be reduced or skipped, plus one, are less than required by the FPUR Annual Funding Range.

Premium for subsequent rider years is determined in accordance with the *insured's attained age* and the Net Single Premiums per \$1,000 of Paid-Up Insurance rates therefore shown on the policy schedule. The premium is calculated by dividing the amount of paid-up insurance to be purchased that rider year by \$1,000 and multiplying by the applicable rate shown on the policy schedule. Rider premiums can be submitted at a different time and interval from the policy to which this rider is attached. We may limit the amount of any increase in premiums to the then current policy schedule amount.

Notwithstanding, anything contained in any Waiver of Premium Rider attached to the policy to the contrary, premiums for this rider are not waived. The premiums for this rider are not eligible to be paid by any Automatic Premium Loan.

EXPENSE CHARGES. A charge equal to an applicable expense charge percentage multiplied by the premium paid will be deducted from each premium submitted.

VALUES. This rider does have cash value and loan value. Values per \$1,000 of paid-up insurance are shown on the policy schedule. Loans and surrenders are subject to the same terms, conditions, and privileges as set forth in the policy for policy loans and surrenders.

TERMINATION. The right to purchase additional amounts of paid-up insurance shall terminate at the earliest of:

- (1) when any premium for the policy is due and unpaid beyond the end of the premium's grace period;
- (2) when the policy is changed to a paid-up policy;
- (3) when the policy is changed to extended term insurance;
- (4) when the policy terminates;
- (5) the expiration date shown on the policy schedule for this rider; or
- (6) when premiums for this rider are not paid for the number of years as shown on the policy schedule as being able to be skipped or reduced plus one.

This rider will terminate at the earliest of:

- (1) when this rider is surrendered for its net cash value;
- (2) the date the rider proceeds are paid; or
- (3) the date *we* receive *written notice* from *you* requesting termination of this rider.

DIVIDENDS. This rider will share in *our* divisible surplus. This rider's share, if any, will be determined annually by *us*. Dividends under this rider are subject to the same terms, conditions, privileges and options as set forth in the policy for policy dividends.

INCONTESTABILITY. *We* will not contest this rider after it has been in force while the *insured* is alive for two years from the *issue date* of this rider nor will *we* contest any increased insurance death benefits later than two years after the effective date for such increased benefits. If *you* did not request the increase or if evidence of insurability was not required, *we* will not contest the increase. As used herein, increased insurance death benefits shall include any favorable policy changes requested by *you*. If the base policy is reinstated, the contestable period will start over again beginning on the reinstatement date, but only for statements made in the application for reinstatement.

SUICIDE EXCLUSION. For two years from the *issue date* of this rider, *we* will not pay any paid-up insurance if the *insured* commits suicide (while sane or insane). *We* will terminate this rider and give back the premiums paid, minus any *loan balance*, *lien balance*, and any partial withdrawals. *We* will not pay any increases in insurance death benefits that are subject to evidence of insurability if the *insured* commits suicide (while sane or insane) within two years after the effective date for such increases.

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Secretary

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GUARANTEED INSURABILITY RIDER

RIDER SPECIFICATIONS. The amount of insurance and premium for this rider are shown on the policy schedule. The *issue date* of this rider is the same as the policy except when this rider is issued at a later date. If this rider is issued after the policy is issued, a supplemental policy schedule will be issued reflecting the specifications for this rider.

CONTRACT. This rider is made a part of the policy and is based on the application and any supplemental applications for this rider and payment of the premium.

BENEFIT. For each option date within the option period, while this rider is in force, *you* may purchase a new policy on the life of the *insured* without evidence of insurability.

OPTION DATES. The option dates will be the policy anniversary nearest the *insured's* 22nd, 25th, 28th, 31st, 34th, 37th and 40th birthdays. The option period for an option date begins 60 days before and ends 31 days after that date.

You may elect to advance the next option date when one of these events happens:

- (1) the date of the *insured's* marriage;
- (2) the date of the live birth of a child of the *insured*; or
- (3) the date of legal adoption by the *insured* of a child under 18 years of age.

The option period for an option date that has been advanced begins on the date of the occasions listed above and ends 91 days after that date. If the *insured* dies before an option date, any additional life insurance which has been applied for will not take effect and any premiums paid for such insurance will be refunded.

If more than one child is born or adopted on the same date, an option date will be advanced with respect to each child. An advanced option date will replace the next regular option date. At no time may the total number of options that are elected be more than the number of option dates that occur after the effective date of this rider.

PURCHASE OF A NEW POLICY. A new policy may be purchased at any time within the option period provided that:

- (1) no premium is in default and this rider is in force on that date;
- (2) the amount of the new policy is at least \$25,000 but not more than the option amount;
- (3) written application, signed by *you* and the *insured*, in a form satisfactory to *us* is received, and
- (4) if applicable, proof of marriage, birth or adoption is received by *us*.

The new policy is any one of the permanent life policies issued by *us* when the new policy is purchased. The new policy will be the same premium class as the base policy to which this rider is attached. The *policy date* of the new policy will be the date on which the application and first premium for the new policy, and any proof of marriage, birth or adoption are received. In no event will the new policy become effective before its *policy date*. The premium rate for the new policy will be *our* then published rate at the age of the *insured* on the birthday nearest the *policy date* of the new policy. If more than one option is elected at the same time and the new insurance is combined in one policy, the number of options elected will be the same as if the insurance had not been combined.

A Waiver of Premium Rider may be issued with the new policy without evidence of insurability if:

- (1) such rider is contained in this policy and is in force at the time of purchase of the new policy; and
- (2) the *insured* is not totally disabled on the date the application for the new policy is made.

An Accidental Death Benefit Rider may be issued with the new policy without evidence of insurability if:

- (1) such rider is contained in this policy and is in force at the time of purchase of the new policy;
- (2) the amount of accidental death benefit issued with the new policy is not more than the amount of the new policy; and
- (3) the total amount of accidental death benefit in all policies issued by *us* on the *insured's* life does not exceed \$150,000.

AUTOMATIC ISSUE. If the policy contains a Waiver of Premium Rider and premiums are being waived on an option date, we will issue a new policy for the option date. The new policy will be a Whole Life Policy and will contain a Waiver of Premium Rider. Premiums on the new policy will be waived during the continuance of total disability as defined in the rider.

TERMINATION. This rider will terminate at the earliest of:

- (1) when any premium for the policy is due and unpaid beyond the end of the premium's grace period;
- (2) when the policy is changed to a paid-up policy;
- (3) when the policy is changed to extended term insurance;
- (4) when the policy terminates;
- (5) when the amount of insurance of the policy is reduced to less than \$25,000;
- (6) the end of the option period for the last regular option date; or
- (7) the date we receive *written notice* from *you* requesting termination of this rider.

REDUCTION OF OPTION AMOUNT. If the amount of insurance of the policy is reduced below the option amount but not below \$25,000, the option amount will be reduced to the amount of insurance of the reduced policy. Premiums for this rider will be reduced accordingly.

REINSTATEMENT. This rider may be reinstated upon reinstatement of the policy. If this rider is reinstated, the contestable period will start over again beginning on the reinstatement date, but only for statements made in the application for reinstatement.

INCONTESTABILITY. As applied to this rider, the contestable period shall be measured from the *issue date* of this rider.

VALUES. This rider does not have cash value or loan value.

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LEVEL TERM RIDER

RIDER SPECIFICATIONS. The amount of term insurance, term period, *issue date*, conversion period ends, expiration date and the guaranteed maximum premiums for this rider are shown on the policy schedule. The *issue date* of this rider is the same as the policy.

CONTRACT. This rider is made a part of the policy and is based on the application and any supplemental applications for this rider and payment of the premium.

PAYMENT OF INSURANCE. We will pay the amount of insurance in force under this rider to *your* beneficiary when we receive satisfactory proof of the *insured's* death. Payment is subject to the terms and provisions of the policy and this rider. The amount of insurance hereunder will be added to the proceeds payable under the policy.

PREMIUM. Rider premium is payable at the same time and interval as the policy to which this rider is attached. Premiums changed at the time of renewal will not exceed the guaranteed maximum premium. The guaranteed maximum premiums for this rider are shown on the policy schedule.

Current premiums are based on *our* premium schedule in effect on the *policy date*.

We may, at *our* sole discretion, change the current premiums after the initial term period, subject to the following:

- (1) the annual renewal premium rate for this rider will not exceed the maximum annual premiums shown on the policy schedule;
- (2) the premium may not be changed more than once during any 12 month period;
- (3) notification of premium changes will be sent to *you* at the last known address at least 30 days before the date on which the change will be effective;
- (4) any change of premium will be based on *our* expectations as to future experience for such elements as persistency, expenses, mortality, taxes, and investment earnings;
- (5) any change in premium will be on a uniform basis applying to all policies with the same issue age, premium class, duration, and plan of insurance as this rider. A change of health will not cause a change of premium; and
- (6) Any change in premium will take effect on the anniversary date of this rider, following the date we make the change.

RENEWAL. The amount of term insurance under this rider may be renewed for additional term periods. At the end of any term period, this rider may be renewed for an additional term period if:

- (1) no premium is in default and this rider is in force on that date; and
- (2) the renewal premium is paid within the grace period. However, in no event will this rider continue in force beyond the rider expiration date.

On any anniversary of this rider, the amount of term insurance may be decreased by *you* by *written notice*.

CONVERSION PRIVILEGE. This rider may be converted, without evidence of insurability, to a new policy on the life of the *insured*, if:

- (1) no premium is in default and this rider is in force on that date;
- (2) the amount of the new policy is not greater than the amount provided by this rider, but not less than the minimum amount at which the desired policy form is regularly issued;
- (3) we receive a written application before the conversion period ends for this rider;
- (4) the *insured* is not totally disabled and eligible for benefits under the Waiver of Premium Rider which is a part of the policy to which this rider is attached; and
- (5) the new policy is any one of the permanent policies issued by *us* at the time of conversion.

The new policy will be the same premium class as this rider. The *policy date* of the new policy will be the date of conversion.

The premium rate for the new policy will be *our* then published rate at the age of the *insured* on the birthday nearest the date of conversion. The conversion is subject to payment of the first modal premium for the new policy. Payment of the first premium for the new policy must be received by *us* no later than 30 days after we approve the conversion application.

NEW POLICY RIDERS. A Waiver of Premium Rider and Accidental Death Benefit Rider may be issued with the new policy only with evidence of insurability and *our* consent.

EXTENDED CONVERSION PRIVILEGE. If total disability benefits are being credited before age 60 under a Waiver of Premium Rider that is part of the policy to which this rider is attached and the total disability continues until the conversion period ends, the conversion period will extend for 180 days after the date total disability stops.

AGE. Age means the *attained age* nearest the *insured's* birthday.

TERMINATION. This rider will terminate at the earliest of:

- (1) when any premium for the policy is due and unpaid beyond the end of the premium's grace period;
- (2) when the policy is changed to a paid-up policy;
- (3) when the policy is changed to extended term insurance;
- (4) when this rider is converted to a new policy;
- (5) when the policy terminates;
- (6) the expiration date shown on the policy schedule for this rider; or
- (7) the date *we* receive *written notice* from *you* requesting termination of this rider.

REINSTATEMENT. This rider may be reinstated upon reinstatement of the policy. If this rider is reinstated, the contestable period will start over again beginning on the reinstatement date, but only for statements made in the application for reinstatement.

INCONTESTABILITY AND SUICIDE EXCLUSION. As applied to this rider, the policy contestable and suicide periods shall be measured from the *issue date* of this rider.

VALUES. This rider does not have cash value or loan value.

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WAIVER OF PREMIUM RIDER

RIDER SPECIFICATIONS. The premium for this rider is shown on the policy schedule. The *issue date* of this rider is the same as the policy except when this rider is issued at a later date. If this rider is issued after the policy is issued, a supplemental policy schedule will be issued reflecting the specifications for this rider.

CONTRACT. This rider is made a part of the policy and is based on the application and any supplemental applications for this rider and payment of the premium.

DEFINITION OF TOTAL DISABILITY. The *insured* is considered to be totally disabled if:

- (1) **During the first 24 months of total disability**, the *insured* is unable to perform any of the substantial and material duties of his or her occupation for wage or profit, due to sickness or accidental bodily injury. Being a homemaker or student is considered engaging in work for wage or profit; and,
- (2) **After the first 24 months of total disability**, the *insured* is unable to perform any of the substantial and material duties of his or her occupation for wage or profit, or any other occupation for which he or she becomes reasonably suited by education, training or experience, due to sickness or accidental bodily injury. Being a homemaker or student is considered engaging in work for wage or profit.

Total disability is also the total and permanent loss, by the *insured*, of:

- (1) the sight of both eyes;
- (2) hearing of both ears;
- (3) speech;
- (4) the use of both hands;
- (5) the use of both feet; or
- (6) the use of one hand and one foot.

BENEFIT. We will waive the premiums for the policy and riders stated on the policy schedule other than any paid up riders, when we receive satisfactory proof.

Total disability must continue for six consecutive months before the *insured* is eligible to have the premium waived by us.

If the *insured's* total disability begins before the policy anniversary nearest the *insured's* 60th birthday, we will waive all premiums due under the policy for the period that the *insured* continues to be totally disabled. If such period extends to the policy anniversary nearest the *insured's* 65th birthday, we will waive all further premiums due for the *insured*.

If the *insured's* total disability begins after the policy anniversary nearest the *insured's* 60th birthday, we will waive all premiums due under the policy for the period that the *insured* continues to be totally disabled, but only up to the policy anniversary nearest the *insured's* 65th birthday.

The premium must continue to be paid until the claim for waiver of premium is approved by us. A premium paid and later waived will be refunded. If total disability begins during a grace period, payment of the overdue premium is required to avoid a lapse of insurance before we approve the claim for the waiver of premium benefit.

While premiums are being waived, all benefits included under the policy and any attached riders (except for paid up riders) will continue to remain in force.

Premiums waived by us will not be deducted from the death benefit proceeds.

WRITTEN NOTICE AND PROOF OF CLAIM. *Written notice* and satisfactory proof of the *insured's* total disability must be given to *us* while this rider is in force:

- (1) during the life of the *insured*;
- (2) during the period of total disability;
- (3) within one year after the beginning of the total disability; and
- (4) before the policy anniversary nearest the *insured's* 65th birthday.

Failure to give *written notice* and satisfactory proof within one year will not cause the denial of a claim if it is shown that the *written notice* and satisfactory proof were given as soon as was reasonably possible. However, no premium due more than one year prior to *our* receipt of satisfactory proof of claim will be waived.

Satisfactory proof of continuance of total disability must be given to *us* as often as *we* reasonably require. After the first two years of continuous disability, satisfactory proof will not be required more than once a year. Examination of the *insured* at *our* expense by physicians approved by *us* may be required as part of any satisfactory proof. If satisfactory proof is not given to *us* when required, no further premiums will be waived.

EXCLUSION AND LIMITATIONS. No benefit will be paid if disability results from or is contributed to by:

- (1) attempted suicide, or intentionally self-inflicted injury, while sane or insane;
- (2) an act of declared or undeclared war, whether or not the *insured* is a member of any armed forces;
- (3) any active participation in a riot, insurrection or terrorist activity;
- (4) an attempt to commit, or commission of, an assault or felony;
- (5) voluntary intake or use by means of:
 - (a) any drug, unless prescribed or administered by a physician and taken in accordance with the physician's instructions; or
 - (b) poison, gas or fumes, unless a direct result of occupational accident;
- (6) while the *insured* is incarcerated;
- (7) intoxication as defined by the jurisdiction where the total disability occurred; or
- (8) participation in an illegal occupation or activity.

TERMINATION. This rider will terminate at the earliest of:

- (1) when any premium for the policy is due and unpaid beyond the end of the premium's grace period;
- (2) when the policy is changed to a paid-up policy, if applicable;
- (3) when the policy is changed to extended term insurance, if applicable;
- (4) when the policy terminates;
- (5) the policy anniversary nearest the *insured's* 65th birthday. However, the termination will not affect an eligible claim for total disability that occurred before age 65; or
- (6) the date *we* receive *written notice* from *you* requesting termination of this rider.

VALUES. This rider does not have cash value or loan value.

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AVIATION EXCLUSION ENDORSEMENT - CIVIL

Your policy is endorsed as follows:

If the *insured's* death results from or is contributed to by riding in or descending from any kind of aircraft other than as a fare-paying passenger on a scheduled or charter flight operated by a scheduled airline, the only amount payable by *us* will be the larger of:

- (1) the premiums paid, less dividends paid in cash or used in the payment of premiums;
- (2) the cash value; or
- (3) the reserve on the amount of insurance of the policy and on any paid-up additions, plus any due and unpaid dividend.

In no event will the amount payable exceed the amount of insurance in force at death. Any *loan balance* or *lien balance* as of the date of death will be deducted from the amount payable.

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AVIATION EXCLUSION ENDORSEMENT - MILITARY

Your policy is endorsed as follows:

If the *insured's* death results from or is contributed to by riding in or descending from any kind of aircraft operated by or for the armed forces (1) as a participant in a sporting event or hobby or (2) as a pilot, crew member or participant in training, the only amount payable by *us* will be the larger of:

- (1) the premiums paid, less dividends paid in cash or used in the payment of premiums;
- (2) the cash value; or
- (3) the reserve on the amount of insurance of the policy and on any paid-up additions, plus any due and unpaid dividend.

In no event will the amount payable exceed the amount of insurance in force at death. Any *loan balance* or *lien balance* as of the date of death will be deducted from the amount payable.

"Crew member" includes anyone who has duties at any time on the flight involving either the flight or the aircraft.

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AVIATION HAZARD ENDORSEMENT

Your policy has been endorsed as follows:

The premium shown on the policy schedule includes an extra premium for aviation hazard. The extra premium will not increase policy values.

If any change is made to this policy or if it is converted to a new policy, there will still be an additional charge for aviation hazard. The extra premium will be based on the same premium class as this policy, if such class exists.

If the policy has cash value or is converted to a new policy with cash value, the only Lapse Benefit that may be elected is paid-up insurance. Extended term insurance may not be elected as a Lapse Benefit.

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CONVERSION ENDORSEMENT

This policy is issued pursuant to a conversion or exchange of a policy or rider previously issued by *us*. Therefore, the suicide exclusion and incontestability provisions of this policy will be deemed to run from the date of issue of the converted or exchanged coverage for those amounts of insurance and benefits previously in force under the replaced coverage. For all else, the suicide exclusion and incontestability provisions will run from the date of issue of this policy.

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**EXTRA PREMIUM ENDORSEMENT
FOR ACCIDENTAL DEATH BENEFIT**

Your policy has been endorsed as follows:

The premium shown on the policy schedule for the Accidental Death Benefit Rider includes an extra premium for:

- (1) medical impairment;
- (2) special hazard; or
- (3) hazardous occupation.

The extra premium may be removed on or after the first policy anniversary. We must receive satisfactory proof that:

- (1) the impairment or special hazard no longer exists; or
- (2) the *insured* has changed occupation to one which, according to *our* rules, is not hazardous.

If more than one cause contributes to the need for an extra premium, only part of the extra premium may be removed as long as any of the causes still exist.

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EXTRA PREMIUM ENDORSEMENT

Your policy has been endorsed as follows:

If any change is made to this policy or if it is converted to a new policy, there will still be an additional charge. The extra premium will be based on the same premium class as this policy.

If the policy has cash value or is converted to a new policy with cash value, the only Lapse Benefit that may be elected is paid-up insurance. Extended term insurance may not be elected as a Lapse Benefit.

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**EXTRA PREMIUM ENDORSEMENT
FOR WAIVER OF PREMIUM**

Your policy has been endorsed as follows:

The premium shown on the policy schedule for the Waiver of Premium Rider includes an extra premium for:

- (1) medical impairment;
- (2) special hazard; or
- (3) hazardous occupation.

The extra premium may be removed on or after the first policy anniversary. *We* must receive satisfactory proof that:

- (1) the impairment or special hazard no longer exists; or
- (2) the *insured* has changed occupation to one which, according to *our* rules, is not hazardous.

If more than one cause contributes to the need for an extra premium, only part of the extra premium may be removed as long as any of the causes still exist.

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HAZARDOUS OCCUPATION ENDORSEMENT

Your policy has been endorsed as follows:

The premium shown on the policy schedule includes an extra premium for hazardous occupation. The extra premium will not increase policy values.

The extra premium may be removed on or after the first policy anniversary. *We* must receive satisfactory proof that the *insured* has changed occupation to one which, according to *our* rules, is not hazardous.

If any change is made to this policy or if it is converted to a new policy, there will still be an additional charge for hazardous occupation. The extra premium will be based on the same premium class as this policy, if such premium class exists.

If the policy has cash value or is converted to a new policy with cash value, the only Lapse Benefit that may be elected is paid-up insurance. Extended term insurance may not be elected as a Lapse Benefit.

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RACING EXCLUSION ENDORSEMENT

Your policy is endorsed as follows:

If the *insured's* death results from or is contributed to by riding, driving or participating in any type of motor vehicle racing, the only amount payable by *us* will be the larger of:

- (1) the premiums paid, less dividends paid in cash or used in the payment of premiums;
- (2) the cash value; or
- (3) the reserve on the amount of insurance of the policy and on any paid-up additions, plus any due and unpaid dividend.

In no event will the amount payable exceed the amount of insurance in force at death. Any *loan balance* or *lien balance* as of the date of death will be deducted from the amount payable.

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State:	District of Columbia	Filing Company:	Ameritas Life Insurance Corp.
TOI/Sub-TOI:	L07I Individual Life - Whole/L07I.101 Fixed/Indeterminate Premium - Single Life		
Product Name:	L-3017 10-16, etal		
Project Name/Number:	L-3017 10-16, etal/L-3017 10-16, etal		

Supporting Document Schedules

Satisfied - Item:	Guaranty Association Notice
Comments:	Please find attached an informational copy of our Guaranty Association Notice that will be used with these policies.
Attachment(s):	1683 DC - Gty Assoc Notice.pdf
Item Status:	
Status Date:	

Satisfied - Item:	Readability Certification
Comments:	
Attachment(s):	Readability Certification-DC.pdf
Item Status:	
Status Date:	

Satisfied - Item:	Statement of Variability
Comments:	
Attachment(s):	Endorsement Statement of Variability.pdf 3017 10-16 & 3018 10-16 Statement of Variability.pdf 3017 P121 SCH 10-16 Statement of Variability.pdf 3018 P100 SCH 10-16 Statement of Variability.pdf 3018 P10 SCH 10-16 Statement of Variability.pdf Rider Statement of Variability.pdf
Item Status:	
Status Date:	

SUMMARY OF GENERAL PURPOSES, COVERAGE LIMITATIONS AND CONSUMER PROTECTION

General Purposes

Residents of the District of Columbia should know that licensed insurers who sell health insurance, life insurance and annuities in the District of Columbia are members of the District of Columbia Life and Health Insurance Guaranty Association ("Guaranty Association").

The purpose of the Guaranty Association is to provide statutorily-determined benefits associated with covered policies and contracts in the unlikely event that a member insurer is unable to meet its financial obligations and is found by a court of law to be insolvent. When a member insurer is found by a court to be insolvent, the Guaranty Association will assess the other member insurers to satisfy the benefits associated with any outstanding covered claims of persons residing in the District of Columbia. However, the protection provided through the Guaranty Association is subjected to certain statutory limits explained under "Coverage Limitations" section, below. In some cases, the Guaranty Association may facilitate the reassignment of policies or contracts to other licensed insurance companies to keep the coverage in-force, with no change in contractual rights or benefits.

Coverage

The Guaranty Association, established pursuant to the Life and Health Guaranty Association Act of 1992 ("Act"), effective July 22, 1992 (D.C. Law 9-129; D.C. Official Code § 31-5401 *et seq.*), provides insolvency protection for certain types of insurance policies and contracts.

The insolvency protections provided by the Guaranty Association is generally conditioned on a person being 1) a resident of the District of Columbia and 2) the individual insured or owner under a health insurance, life insurance, or annuity contract issued by a member insurer, or insured under a group policy insurance contract issued by a member insurer. Beneficiaries, payees, or assignees of District insureds are also covered under the Act, even if they reside in another state.

Coverage Limitations

The Act also limits the amount the Guaranty Association is obligated to pay. The benefits for which the Guaranty Association may become liable shall be limited to the lesser of:

- The contractual obligations for which the insurer is liable or for which the insurer would have been liable if it were not an impaired or insolvent insurer; or
- With respect to any one life, regardless of the number of policies, contracts, or certificates:
 - \$300,000 in life insurance death benefits for any one life, including net cash surrender or net cash withdrawal values;
 - \$300,000 in the present value of annuity benefits, including net cash surrender or net cash withdrawal values;
 - \$300,000 in the present value of structured settlement annuity benefits, including net cash surrender or net cash withdrawal values;
 - \$300,000 for long-term care insurance benefits;
 - \$300,000 for disability insurance benefits;
 - \$500,000 for basic hospital, medical, and surgical insurance, or major medical insurance benefits;
 - \$100,000 for coverage not defined as disability insurance or basic hospital, medical and surgical insurance or major medical insurance or long term care insurance including any net cash surrender and net cash withdrawal values.

In no event is the Guaranty Association liable for more than \$300,000 in benefits with respect to any one life (\$500,000 in the event of basic hospital, medical and surgical insurance or major medical insurance).

Additionally, the Guaranty Association is not obligated to cover more than \$5,000,000 for multiple non-group policies of life insurance with one owner regardless of the number of policies owned.

Exclusions Examples

Policy or contract holders are not protected by the Guaranty Association if:

- They are eligible for protection under the laws of another state (this may occur when the insolvent insurer was domiciled in a state whose guaranty association law protects insureds that live outside of that state);
- Their insurer was not authorized to do business in the District of Columbia; or
- Their policy was issued by a charitable organization, a fraternal benefit society, a mandatory state pooling plan, a mutual assessment company, an insurance exchange, a non-profit hospital or medical service organization, a health maintenance organization, or a risk retention group.

The Guaranty Association also does not cover:

- Any policy or portion of a policy which is not guaranteed by the insurer or for which the individual has assumed the risk;
- Any policy of reinsurance (unless an assumption certificate was issued);
- Any plan or program of an employer or association that provides life, health, or annuity benefits to its employees or members and is self-funded;
- Interest rate guarantees which exceed certain statutory limitations;
- Dividends, experience rating credits or fees for services in connection with a policy;
- Credits given in connection with the administration of a policy by a group contract holder; or
- Unallocated annuity contracts.

Consumer Protection

To learn more about the above referenced protections, please visit the Guaranty Association's website at www.dclifega.org. Additional questions may be directed to the District of Columbia Department of Insurance, Securities and Banking (DISB) and they will respond to questions not specifically addressed in this disclosure document.

Policy or contract holders with additional questions may contact either:

**District of Columbia
Department of Insurance, Securities and Banking
810 First Street NE, Suite 701
Washington, DC 20002
(202) 727-8000**

**District of Columbia
Life and Health Guaranty Association
1200 G Street NW
Washington, DC 20005
(202) 434-8771**

Pursuant to the Act (D.C. Official Code § 31-5416), insurers are required to provide notice to policy and contract holders of the existence of the Guaranty Association and the amounts of coverage provided under the Act. Your insurer and agent are prohibited by law from using the existence of the Guaranty Association and the protection it provides to market insurance products. You should not rely on the insolvency protection provided under the Act when selecting an insurer or insurance product. If you have obtained this document from an agent in connection with the purchase of a policy or contract, you should be aware that such delivery does not guarantee that the Guaranty Association would cover your policy or contract. Any determination of whether a policy or contract will be covered will be determined solely by the coverage provisions of the Act.

This disclosure is intended to summarize the general purpose of the Act and does not address all the provisions of the Act. Moreover, the disclosure is not intended and should not be relied upon to alter any rights established in any policy or contract or under the Act.

CERTIFICATE OF READABILITY

INSURER: **Ameritas Life Insurance Corp.**

hereby certifies that the filing achieves a minimum Flesch Reading Ease Test Score of 50 as stated below.

Form Name	Form Number	Flesch Score
Whole Life Policy	3017 10-16 DC	61
Whole Life Policy Schedule Page	3017 P121 SCH 10-16	n/a
Whole Life Policy	3018 10-16 DC	61
Whole Life Policy Schedule Page	3018 P100 SCH 10-16	n/a
Whole Life Policy Schedule Page	3018 P10 SCH 10-16	n/a
Accidental Death Benefit Rider	ADBRWLT 10-16	57
Children's Insurance Rider	CIRWLT 10-16	64
Flexible Paid-Up Rider	FPURWL 10-16 DC	59
Guaranteed Insurability Rider	GIRWL 10-16	65
Level Term Rider	LTRWL 10-16	60
Waiver of Premium Rider	WPRWL 10-16	51
Aviation Exclusion Endorsement - Civil	AEECWL 10-16	70
Aviation Exclusion Endorsement - Military	AEEMWL 10-16	69
Aviation Hazard Endorsement	AHEWL 10-16	62
Conversion Endorsement	CE 10-16	61*
Extra Premium Endorsement for Accidental Death Benefit	EPEADB 10-16	61
Extra Premium Endorsement	EPEWL 10-16	68
Extra Premium Endorsement for Waiver of Premium	EPEWP 10-16	62
Hazardous Occupation Endorsement	HOEWL 10-16	57
Racing Exclusion Endorsement	REEWL 10-16	68

* Score shown is taken with the 3017 10-16 DC policy

Signature: 

Title: Second Vice President and Associate General Counsel

**AMERITAS LIFE INSURANCE CORP.
STATEMENT OF VARIABILITY**

Form Numbers: ICC16 AEECWL 10-16
 ICC16 AEEMWL 10-16
 ICC16 AHEWL 10-16
 ICC16 CE 10-16
 ICC16 EPEADB 10-16
 ICC16 EPEWL 10-16
 ICC16 EPEWP 10-16
 ICC16 HOEWL 10-16
 ICC16 REEWL 10-16

Form Type: **Endorsement**

The following information has been bracketed to allow for future changes.

Policy – Cover Page

Variable Fields	Explanation of Variability/Range
Officer Signatures	In the event of a change in company officers, the new officer's signatures will be shown.

**AMERITAS LIFE INSURANCE CORP.
STATEMENT OF VARIABILITY**

Form Numbers: **3017 10-16**
 3018 10-16

Form Type: **Individual Whole Life Insurance Policy**

The following information has been bracketed to allow for future changes.

Policy – Cover Page

Variable Fields	Explanation of Variability/Range
Phone Number Fax Number Client Service Office Address Website	This information is bracketed to allow for changes in the future.
Insured	Customer specific information shown as John Doe specimen.
Policy Number	Customer specific information shown as John Doe specimen.
Right to Examine Period	This information is bracketed to allow for state required changes in the future.
Officer Signatures	In the event of a change in company officers, the new officer's signatures will be shown.
Department of Insurance Phone Number	The applicable State Department of Insurance phone number will be shown.

AMERITAS LIFE INSURANCE CORP. STATEMENT OF VARIABILITY

Form Number: 3017 P121 SCH 10-16
Form Type: Individual Whole Life Policy Schedule Page

The following information has been bracketed to allow for future changes. Ranges for these fields are provided as applicable.

Policy Schedule – Page 3 (Policy Information)

Variable Fields	Explanation of Variability/Range
Policy Number	Customer specific information shown as John Doe specimen.
Insured Issue Age and Gender Owner Joint Owner(s)	Customer specific information shown as John Doe specimen. Gender could be Male, Female or Unisex. The Joint Owner information will only populate based on the election of those options.
Policy Date Issue Date	Customer specific information shown as John Doe specimen.
Premium Class	Determined by company underwriting: Standard Tobacco Preferred Tobacco Standard Nontobacco Select Nontobacco Preferred Nontobacco Preferred Plus Nontobacco Substandard Tobacco Substandard Preferred Tobacco Substandard Nontobacco Substandard Select Nontobacco
Mortality Table	Male, Female, Unisex

Policy Schedule – Page 3A (Benefit, Premium and Due Date)

Variable Fields	Explanation of Variability/Range
Riders	Riders will vary based on owner's selection.
Amount of Insurance	Customer specific information shown as John Doe specimen.
Duration of Premium Payments	Customer specific information shown as John Doe specimen. 121 minus Issue age
Annual Premium	Customer specific information shown as John Doe specimen.
First Premium Payment Interval	Annual, Semiannual, Quarterly, Monthly
Policy Fee	The range is \$0 to \$150
Modal Premium	Customer specific information shown as John Doe specimen.
Cumulative Annual Premium	Customer specific information shown as John Doe specimen.
Due Date Beginning On	Customer specific information shown as John Doe specimen.
Total Annual Premium	Customer specific information shown as John Doe specimen

Policy Schedule – Page 3B (Table of Policy Values)

Variable Fields	Explanation of Variability/Range
For Policy Year Ending	Customer specific information shown as John Doe specimen
Cash Values	Customer specific information shown as John Doe specimen
Paid-Up Insurance	Customer specific information shown as John Doe specimen
Extended Term Insurance to:	Customer specific information shown as John Doe specimen
At Age	Customer specific information shown as John Doe specimen

AMERITAS LIFE INSURANCE CORP. STATEMENT OF VARIABILITY

Form Number: 3018 P100 SCH 10-16
Form Type: Individual Whole Life Policy Schedule Page

The following information has been bracketed to allow for future changes. Ranges for these fields are provided as applicable.

Policy Schedule – Page 3 (Policy Information)

Variable Fields	Explanation of Variability/Range
Policy Number	Customer specific information shown as John Doe specimen.
Insured Issue Age and Gender Owner Joint Owner(s)	Customer specific information shown as John Doe specimen. Gender could be Male, Female or Unisex. The Joint Owner information will only populate based on the election of those options.
Policy Date Issue Date	Customer specific information shown as John Doe specimen.
Premium Class	Determined by company underwriting: Standard Tobacco Preferred Tobacco Standard Nontobacco Select Nontobacco Preferred Nontobacco Preferred Plus Nontobacco Substandard Tobacco Substandard Preferred Tobacco Substandard Nontobacco Substandard Select Nontobacco
Mortality Table	Male, Female, Unisex
Maximum Loan Interest Rate	Range is 1 to 10%

Policy Schedule – Page 3A (Benefit, Premium and Due Date)

Variable Fields	Explanation of Variability/Range
Riders	Riders shown will vary based on owner's selection.
Amount of Insurance	Customer specific information shown as John Doe specimen.
Duration of Premium Payments	Customer specific information shown as John Doe specimen. 121 minus Issue age
Annual Premium	Customer specific information shown as John Doe specimen.
First Premium Payment Interval	Annual, Semiannual, Quarterly, Monthly
Policy Fee	The range is \$0 to \$150
Modal Premium	Customer specific information shown as John Doe specimen.
Cumulative Annual Premium	Customer specific information shown as John Doe specimen.
Due Date Beginning On	Customer specific information shown as John Doe specimen.
Total Annual Premium	Customer specific information shown as John Doe specimen.

Policy Schedule – Page 3B (Table of Policy Values)

Variable Fields	Explanation of Variability/Range
For Policy Year Ending	Customer specific information shown as John Doe specimen.
Cash Values	Customer specific information shown as John Doe specimen.
Paid-Up Insurance	Customer specific information shown as John Doe specimen.
Extended Term Insurance to:	Customer specific information shown as John Doe specimen.
At Age	Customer specific information shown as John Doe specimen.

Policy Schedule – Page 3C (Flexible Paid-Up Rider)

Variable Fields	Explanation of Variability/Range
Annual Funding Range	Range is 25 – 400%
Expense Charge	Range is 0 – 25% up to 50 – 500% of annual base policy premium Range is 0 – 25% for amounts exceeding 50 - 500% of annual base policy premium
Expiration Date	Customer specific information shown as John Doe specimen. Attained age 90
Flexible Paid-Up Rider Premiums can be skipped or reduced for years	Range is 1-7 years
For Policy Year Beginning	Customer specific information shown as John Doe specimen.
Net Premium	Customer specific information shown as John Doe specimen.
Net Single Premiums Per \$1,000 of Paid-Up Insurance	Customer specific information shown as John Doe specimen.
End of Year Cash Values Per \$1,000 of Paid-Up Insurance	Customer specific information shown as John Doe specimen.

Policy Schedule (Level Term Rider) – Page 3D (Table of Maximum Annual Premiums)

Variable Fields	Explanation of Variability/Range
Term Period	10, 15, 20, 30
Conversion Period Ends	Attained age 75
Expiration Date	Attained Age 100
For Policy Year Beginning	Customer specific information shown as John Doe specimen.
Guaranteed Maximum Premium	Customer specific information shown as John Doe specimen.

AMERITAS LIFE INSURANCE CORP. STATEMENT OF VARIABILITY

Form Number: 3018 P10 SCH 10-16
Form Type: Individual Whole Life Policy Schedule Page

The following information has been bracketed to allow for future changes. Ranges for these fields are provided as applicable.

Policy Schedule – Page 3 (Policy Information)

Variable Fields	Explanation of Variability/Range
Policy Number	Customer specific information shown as John Doe specimen.
Insured Issue Age and Gender Owner Joint Owner(s)	Customer specific information shown as John Doe specimen. Gender could be Male, Female or Unisex. The Joint Owner information will only populate based on the election of those options.
Policy Date Issue Date	Customer specific information shown as John Doe specimen.
Premium Class	Determined by company underwriting: Standard Tobacco Preferred Tobacco Standard Nontobacco Select Nontobacco Preferred Nontobacco Preferred Plus Nontobacco Substandard Tobacco Substandard Preferred Tobacco Substandard Nontobacco Substandard Select Nontobacco
Mortality Table	Male, Female, Unisex
Maximum Loan Interest Rate	Range is 1 to 10%

Policy Schedule – Page 3A (Benefit, Premium and Due Date)

Variable Fields	Explanation of Variability/Range
Riders	Riders will vary based on owner's selection
Amount of Insurance	Customer specific information shown as John Doe specimen.
Annual Premium	Customer specific information shown as John Doe specimen.
First Premium Payment Interval	Annual, Semiannual, Quarterly, Monthly
Policy Fee	The range is \$0 to \$150
Modal Premium	Customer specific information shown as John Doe specimen.
Cumulative Annual Premium	Customer specific information shown as John Doe specimen.
Due Date Beginning On	Customer specific information shown as John Doe specimen.
Total Annual Premium	Customer specific information shown as John Doe specimen.

Policy Schedule – Page 3B (Table of Policy Values)

Variable Fields	Explanation of Variability/Range
For Policy Year Ending	Customer specific information shown as John Doe specimen.
Cash Values	Customer specific information shown as John Doe specimen.
Paid-Up Insurance	Customer specific information shown as John Doe specimen.
Extended Term Insurance to:	Customer specific information shown as John Doe specimen.
At Age	Customer specific information shown as John Doe specimen.

**AMERITAS LIFE INSURANCE CORP.
STATEMENT OF VARIABILITY**

Form Numbers: ADBRWLT 10-16
 CIRWLT 10-16
 FPURWL 10-16
 GIRWL 10-16
 LTRWL 10-16
 WPRWL 10-16

Form Type: Rider

The following information has been bracketed to allow for future changes.

Policy – Cover Page

Variable Fields	Explanation of Variability/Range
Officer Signatures	In the event of a change in company officers, the new officer's signatures will be shown.